Christmas Appeal

Helping to bring peace this Christmas!

During the festive season, we often find ourselves surrounded by loved ones, cherishing the joy and comfort that Christmas brings. However, amidst the hustle and bustle, it is vital that we remember those who may not have the same peace of mind.

At ICHC, our dedicated team of chaplains is working tirelessly to bring comfort and support to patients, families, and staff members during their most challenging times. We understand that illness and hospitalization can be an overwhelming experience, particularly during the holiday season.

Through our compassionate presence, we offer solace, empathy, and spiritual support to individuals in need. Our chaplains offer a listening ear when it feels like no one else understands the emotional and spiritual burden that can accompany illness.

By donating to ICHC this Christmas, you will be giving the gift of peace of mind. Your kindness will provide a sense of comfort and hope to those who may have lost both through uncertainty, pain and suffering.

To contribute, please visit our website at www.ichc.org.nz or return the form on the reverse of this letter. Your support will have a profound impact on the lives of many this holiday season.

Thank you for considering our appeal and for being a part of our mission to provide peace of mind to those in need. We wish you and your loved ones a joyous and meaningful Christmas

With heartfelt gratitude,

Barry Fisk

Chief Executive





Delivering Healthcare Chaplaincy

Te Kaunihera Whakawhanaunga o nga Minita Hohipera, Hauora

Yes! I would like to make a donation towards the work of ICHC () \$100 () \$50 () \$25 () Other All donations over \$5 are eligible for a tax credit. am a new donor I am an existing donor Name: Address: Email: Phone: NOTE: Cheques are no longer accepted by our Bank! Please choose your method of donation: **Online**—Make your payment now at www.ichc.org.nz Bank Deposit—Account Name: Interchurch Council for Hospital Chaplaincy or ICHC Account Number: 06-0561-0086166-21 Reference: Name of location your donation is for e.g. Nelson, Wellington, etc. **Credit or Debit Card** Location for donation (optional): Card Type: Mastercard Card Number: Name on Card: **Expiry Date:** By completing this form I/we Signature: authorize ICHC to arrange for the nominated funds to be debited from ICHC sends annual tax receipts after 31 March each year.

Bequests— If you would like to leave a gift to ICHC in your will, please discuss this with your lawyer.

Please complete this form and return it to:

Interchurch Council for Hospital Chaplaincy PO BOX 6427, Marion Square, Wellington 6141

Phone: 0800 246 7242 or (04) 801 8008 | Email: info@ichc.org.nz

ICHC is a registered charity. Our Charities Commission No. is CC21346

