



P.O. Box 90 | Pisgah Forest, NC 28768

[InheritanceOfHope.org](http://InheritanceOfHope.org)

## Physician Letter

*"Every Family Deserves a Legacy"*®

### BACKGROUND INFORMATION

Inheritance of Hope, a 501(c)(3) nonprofit charity, is an organization devoted to inspiring hope in young families facing the loss of a parent. In addition to offering literature, scholarships, and support communities, Inheritance of Hope hosts Legacy Retreats®, all-expenses-paid events offering family memories and building a community of support with families in similar situations. We appreciate your willingness to facilitate an incredible opportunity for your patient and his/her family. In an effort to maximize our positive impact on families, we are currently pursuing additional partnering opportunities within the healthcare community. For additional information, please contact Deric Milligan, Co-Founder & CEO (914.213.8435).

### PATIENT INFORMATION

Full name: \_\_\_\_\_ Date: \_\_\_\_\_

Diagnosis: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Because of this condition, are the patient's children facing the loss of their parent?  yes  no

Is the applicant well enough to travel?  yes  no

Restrictions of the applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### DOCTOR INFORMATION

Doctor's name (print): \_\_\_\_\_

Office address: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_



Doctor's signature: \_\_\_\_\_



Please scan and email this completed letter to [info@InheritanceOfHope.org](mailto:info@InheritanceOfHope.org)