

Please join us
for The Tree of Light
Illumination Ceremony

Sunday, December 7, 2025
at 4:30 PM
1st Floor Lobby

The Valley Hospital
4 Valley Health Plaza
Paramus, NJ 07652

The Valley Hospital Auxiliary is pleased to announce the sale of lights for the Tree of Light outside the hospital lobby. Purchase a white light to remember someone special... celebrate a birth... wish someone well...or honor an exceptional person.

The names of donors and honorees will be included in the Tribute Book which will be available on-line. Donors will receive a link, via email, to view the Tribute Book.



The Valley Hospital Auxiliary pledges to raise \$1.6 million to support and enhance patient care and comfort in the treatment of cancer, pregnancy-induced hypertension, and the *Butterflies* program for critically ill children.

Thank you for your generous support.



The Valley Hospital Auxiliary

Founded in 1944, seven years before the hospital opened its doors, The Valley Hospital Auxiliary has dedicated itself to a three-fold mission: To serve as a liaison between the hospital and the community, to provide volunteer service within Valley Health System, and to raise funds for special projects for the hospital.

TREE OF LIGHT

Committee

Mary Seminara, **Chair**

Elaine Arezzo	Nora McAvey
Bonnie Dalal	Claire McLellan
Carol Gillespie	Betty Moore
Katherine Grasso	Judy Smith
Elaine Heimberger	Nancy Weiss
Patricia Judge	

President,
The Valley Hospital Auxiliary
Donna Mainardi
Singer

The Valley Hospital Auxiliary is a 501(c)(3) non-profit organization.

Visit www.valleyhealth.com/auxiliary for more information or call 201-447-8136.

The Tree of Light Illumination

My light(s) are purchased for the following:

Please use a separate sheet of paper if additional space is needed.

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

*Must include email address to receive link to Tribute Book

Tree Light Donation (per light/per person):

\$25 \$35 \$55 \$ _____

Light in the Star Donation
(per light/per person):

\$100 _____

**Total
Enclosed**

\$ _____

☐ Check payable to

The Valley Hospital Auxiliary or

Name _____

(As it appears on card)

Credit Card Number _____

Exp. Date _____ CVV _____

Billing Zip Code _____ Amount _____

Mail completed form by November 28, 2025 to:

The Valley Hospital Auxiliary
4 Health Plaza, Paramus, NJ 07652
Attn: Bonnie Dalal

Those who respond after November 28, 2025 will
be added to the Tribute Book but may not receive
their acknowledgements until after the New Year.

In ☐ honor ☐ memory of _____
(Person's name)

for a ☐ Tree Light ☐ Star Light

Acknowledge to: _____

Address: _____

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Please print legibly.