



National  
Kidney  
Foundation®

# Join us! PATIENT, PROFESSIONAL, AND COMMUNITY PICNIC



**Sunday**  
**August 23, 2015**  
**1pm to 4pm**

**Peninsula Park**  
700 N. Rosa Parks Way  
Portland, OR 97217

**1:00 pm:** *Gather & Set-up*

**1:45 pm:** *Food Served*

**3:00 pm:** *Health Professional  
"Everyday Heroes"  
Recognition*

To volunteer, please visit:

<http://bit.ly/1LeVKmd>

## Presented by

National Kidney Foundation *and* Portland Kidney Group

## Food

Main course , shaved ice & dessert will be provided. Please contribute a kidney-friendly dish according to your last name:

*Last Name A-J: Salad/Appetizer*

*Last Name K-S: Side Dish*

*Last Name T-Z: Drinks*

Bring your picnic blanket and folding chairs!

## Everyday Hero Nomination

To nominate a health professional to be honored at the picnic, fill out attached form, call 888.427.5653 or email [julia.schrogin@kidney.org](mailto:julia.schrogin@kidney.org)

**RSVP required by August 14:**

**Name and # in party:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Potluck item:** \_\_\_\_\_ **Email:** \_\_\_\_\_



National **Kidney** Foundation®

## **Nomination Form**

### Everyday Heroes: Healthcare Professionals

*Recognizing outstanding health professionals who work with transplant recipients, donors, and dialysis patients for the everyday heroes they are.*

Guidelines:

- Professionals will be recognized during the Picnic on Sunday, August 23, 2015.
- Please submit completed form by August 10th to Julia Schrogin at [julia.schrogin@kidney.org](mailto:julia.schrogin@kidney.org) or fax to 415-543-3331.

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Name of Healthcare Professional Being Nominated:

Clinic/Facility:

Name of Clinic Social Worker:

Social Worker Email:

Social Worker Phone number:

Occupation/Responsibilities:

Phrase that best describes him or her (something we could include on the certificate):

Briefly share why you are nominating this healthcare professional:

Nominated by (Name):

Email:

Phone Number: