

# UMRHF 2024 Auxiliary Fund Holiday Tree of Love

Ornaments are \$5.00 each



Your Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

**In HONOR Of:** \_\_\_\_\_

Please send acknowledgment to: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please designate the facility where you would like your contribution recognized:**

Cypress Glen  Wesley Pines  Croasdaile Village

**In HONOR Of:** \_\_\_\_\_

Please send acknowledgment to: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please designate the facility where you would like your contribution recognized:**

Cypress Glen  Wesley Pines  Croasdaile Village

**In MEMORY Of:** \_\_\_\_\_

Please send acknowledgment to: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please designate the facility where you would like your contribution recognized:**

Cypress Glen  Wesley Pines  Croasdaile Village

**In MEMORY Of:** \_\_\_\_\_

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Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please designate the facility where you would like your contribution recognized:**

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**Please write Tree of Love on the memo line of your check.**

**I have enclosed \$ \_\_\_\_\_ to: United Methodist Retirement Homes Foundation**

**Give Check and Form to: Cypress Glen Business Office OR**

Mail Check and Form to: United Methodist Retirement Homes Foundation (UMRHF)

2600 Croasdaile Farm Parkway, Suite A-500, Durham, N. C. 27705

**Questions Call: (919) 384-3005**