**Christmas Flower Memorial – Names to be included on a special Christmas Flower Memorial Sheet**

**PLEASE RETURN THE ENTIRE PAGE. THANK YOU.**

Our Church will be festively decorated with poinsettias again this year. You are invited to help sponsor our Christmas flowers in memorial of your loved ones. The names being memorialized will appear as a bulletin insert to allow others to also pray for them during this Christmas Season.

**Instructions:** Please print clearly one name per line. You may have one married couple on a single line by listing them as Mr. and Mrs. first and last name. Once you have completed the form including your name and contact information, please return the entire sheet along with your payment to the parish office or drop in the collection basket. Please mark the envelope “FLOWER MEMORIALS”. Please make checks payable to HOLY SPIRIT.

Thank you for remembering your loved ones in this special way by donating towards our Christmas flowers.

**PLEASE RETURN ENTIRE PAGE – DO NOT CUT.**

Each intention is to be listed on a separate line (i.e. line 1: Mr & Mrs John Smith; line 2: Mrs. Jane Doe)

**IN LOVING MEMORY OF:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ = $10.00

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + $10.00

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + $10.00

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + $10.00

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + $10.00

TOTAL\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FROM:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(as it should appear with the memorial)

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Contact Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name of person submitting the form)

**DEADLINE IS WEDNESDAY, DECEMBER 4 BY 6PM**