



1 Yes! I want to dedicate _____ garden bricks (\$250 each) to be placed in a
of
Park Nicollet healing garden.

2 Direct my gift to

- EVIE'S GARDEN AT
PARK NICOLLET STRUTHERS PARKINSON'S CENTER
- HEALING GARDENS AT
PARK NICOLLET MELROSE CENTER
- SANDRA'S GARDENS OF HOPE AT
PARK NICOLLET FRAUENSHUH CANCER CENTER

3 Donor Information & Recognition

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____ - _____ - _____

EMAIL: _____

For recognition purposes, please list my/our name(s) as:

- I/we wish to remain anonymous. Please do not include my/our name(s) in any listings of donors.

4 Payment Information

CASH OR PERSONAL CHECK (payable to Park Nicollet Foundation)

CREDIT CARD

Amount to charge: \$ _____ (\$250 per brick)

CREDIT CARD INFORMATION

American Express Discover MasterCard Visa

NAME: (as it appears on card) _____

CARD NUMBER: _____

EXP. DATE: _____

SIGNATURE: _____

In accordance with the payment card industry (PCI), we cannot accept credit card information via fax or email.

5 Special Instructions

MY GIFT IS IN HONOR OF/IN MEMORY OF:

IN HONOR OF _____

IN MEMORY OF _____

A letter acknowledging your gift (without including your gift amount) will be sent to the person(s) you wish to notify.

Send letter(s) to:

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PLEASE COMPLETE CUSTOM ORDERING INFORMATION ON BACK ►

