

Memorial Park

ENGRAVED PAVER ORDER FORM

Name of Child: _____ Age: _____ Relationship: _____

\$75.00 Donation - 4" x 8" Paver

Please print information for paver below - limited to 12 letters per line - including spaces

S
A
M
P
L
E

I	N		M	E	M	O	R	Y		O	F
	J	O	H	N		W		D	O	E	
W	E		L	O	V	E		Y	O	U	

\$125.00 Donation - 8" x 8" Paver

Please print information for paver below - limited to 12 letters per line - including spaces

\$200.00 Donation - 12" x 12" Paver

Please print information for paver below - limited to 16 letters per line - including spaces

Donation Made by:

Name _____ Signature _____

Address: _____ City: _____ ST _____ Zip _____

phone # _____ email: _____

Thank You for your tax- deductible donation to M.O.M.S. A personalized paver will be placed in the Memories of Missing Smiles Memorial Park to honor your child, grandchild, niece, nephew or young friend. Please note that donations are non-refundable

Please Make Checks Payable to: M.O.M.S., Inc. Mailing Address: P.O. BOX 684, Ocala, FL 34478 Phone (352) 369-6667 (MOMS)