M.O.M.S.
Memories of Missing Smiles, Inc.

Memorial Park

ENGRAVED MEMORIAL ITEM ORDER FORM

Name of Child: _____ Age: _____ Relationship: _____

4' Recycled Plastic Bench with engraved plate
4 lines of text, 24 characters each line (includes spaces)

$725.00 Donation

Donation Made by:

Name: _____ Signature :_____

Address: _____City:: _____ ST: _____ Zip: _____

Phone # : _____ email: _____

Thank You for your tax-deductible contribution to M.O.M.S. A personalized plaque will be placed on a park bench in the Memories of Missing Smiles Memorial park to honor your child or grandchild.

www.MemoriesOfMissingSmiles.org
Please note that contributions 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)