



A STANDARD OF EXCELLENCE FOR GENERATIONS
EAST LAWN

Alzheimer's Memorial Wall

"Never Alone—Never Forgotten"

Order Form to Place a Name on the Wall

The Price of the First, Middle Initial (optional), and Last Name (no extra verbiage) is \$225.

A portion of the proceeds from each order will be contributed to local Alzheimer's Association of Northern California.

Name to be engraved:

Please Print Clearly

First Name:

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Optional Middle Initial:

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Last Name:

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Name of purchaser: _____ Relationship: _____

Address of Purchaser: _____

Phone Number: _____

E-mail Address of Purchaser: _____

E-mail will be used for notification of future events at East Lawn.

I authorize East Lawn Memorial Park to engrave the above listed name, as printed, on the Alzheimer's Memorial Wall.

Signature of Purchaser: _____ Date: _____

Credit Card:

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Exp Date: _____

Print this form and mail it with your payment to:

East Lawn Memorial Park, P.O.Box 19334, Sacramento, CA 95819

FOR OFFICE USE ONLY

Amount Received: _____

Date: _____

Payment Type: C/C Cash Check # _____ Received by: _____