

Honor your loved one in a meaningful and lasting way

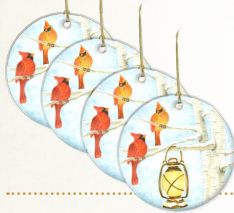
Proceeds enable Unity Grief and Education Center to provide compassionate grief support at no charge to everyone in our communities.

PACKAGE PRICING INCLUDES SHIPPING



PURPLE PACKAGE \$30

One personalized ornament



GOLD PACKAGE \$100

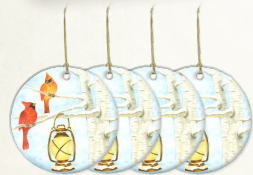
Four personalized ornaments



GARDEN PACKAGE \$600

Personalized & engraved 4"x 8" Memorial/ Honorarium brick installed in the Unity Gardens

Four personalized ornaments



GARDEN SOCIETY \$1,200

Personalized & engraved 8"x 8" Memorial/ Honorarium brick installed in the Unity Gardens

Four personalized ornaments



RSVP due by Thursday, November 30, 2023

First and Last Name _____

E-mail _____

Phone () _____ - _____

Number attending: _____

First and last name to be honored during the program: (please print)

1. _____

2. _____

3. _____

4. _____



"May this ornament design inspire you to look at life's unexpected bright spots as gifts of hope! Cardinals offer a sense of connection, a sign that our loved ones who have passed are still near. The lantern is a warm beacon for the bereaved, a gathering place of light, where love remains and hope is shared."

—Carlie Petersen, Ornament Artist

Order by November 30 to Honor a Life!

Orders may also be placed online at unityhospice.org/honorlife.

I wish to order (select package and indicate quantities):

PURPLE PACKAGE: Qty. _____ x \$30 donation \$ _____

GOLD PACKAGE: Qty. _____ x \$100 donation \$ _____

GARDEN PACKAGE: Qty. _____ x \$600 donation \$ _____

GARDEN SOCIETY: Qty. _____ x \$1,200 donation \$ _____

Please accept my donation of: \$ _____ in support of Unity Grief and Education Center programming.

First name to be printed on the back of each ornament: (Only one name per ornament. Please print.)

1. _____ 3. _____

2. _____ 4. _____

Please include check payable to "Unity" or credit card information in the space provided.

Form of Payment: Check Credit Card Credit Card: AMEX Discover MasterCard VISA

Card # _____ Exp. _____ / _____

Signature _____ Date _____ / _____ / _____

Billing Address

First and Last Name _____

Street Address _____

City _____ State _____ Zip _____

E-mail _____ Phone () _____ - _____

Shipping Address (If different from billing address)

First and Last Name _____

Street Address _____

City _____ State _____ Zip _____

Mail to: Unity, Attn: Honor a Life Committee, 2079 Lawrence Drive, Suite B, De Pere, WI 54115

Please check if you prefer to discontinue receiving mailings from Unity (grief support and fundraising).

For questions, please call Unity at **920-615-2954** or email Director of Development Diana Butz at dbutz@unityhospice.org.