Aurora St. Luke's South Shore

Healing Garden



Permanently honor a loved one with an outdoor brick purchase.

Gift and Recognition Form

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4"x 8" Paver - \$200 (3 lines, 12 characters per line)

Bricks will be displayed in a public place; therefore, Aurora Health Care Foundation will review all inscriptions and contact you if any modifications to your message are necessary. Logos, graphics, phone numbers and Internet addresses are not permitted.

Use the grid below for your brick inscriptions. Write your inscription, one character per box. Note that spaces, dashes, parentheses and punctuation count as characters.

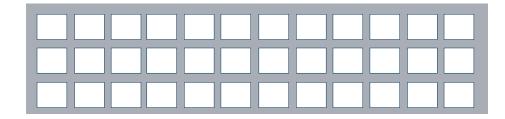
Please return form and payment to:

Aurora Health Care Foundation 2025 Windsor Drive Oak Brook, IL 60523

For questions, please call 877-460-8730.

Donor's Name		
Address		
City S	State	Zip
Phone		
Email		
Enclosed is my check payable Aurora Health Care Foundation		
To pay with a credit card, please http://aah.org/HealingGarden	e visit	
This gift is in \square memory \square hon	or of	
Please Notify		
Address		
CityS	State	Zip
All honorarium/memorial gifts an amount of your gift remains con		edged, but the

☐ 4"x 8" Paver - \$200	
3 lines, 12 characters per	line



I would like to	learn more	ahout	additional	naming o	nnortunities	in the garden

My company will match my gift. Completed form enclosed.

