Aurora Behavioral Health -**Kradwell School**

Learning Gardens



Permanently honor a loved one with an outdoor brick purchase.

Gift and Recognition Form

Brick size and inscription grid space	
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.

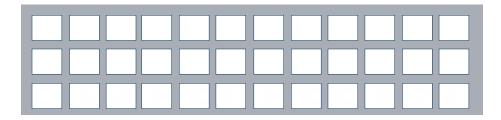
Please return form and payment to:

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

For questions, please call 877-460-8730.

Address		
City	State	Zip
Phone		
Email		
☐ Enclosed is my chec Aurora Health Care I		
To pay with a credit car http://aah.org/Healing@	, ,	
This gift is in \square memor	y \square honor of $_$	
Please Notify		
Address		
		Zip

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



- ☐ I would like to learn more about additional naming opportunities in the garden.
- My company will match my gift. Completed form enclosed.

