# Forever in our Hearts Holiday Tree

LIONEL KELLAND HOSPICE
CARE • RESPECT • DIGNITY

Presented by:

NOTRE DAME RECREATION CENTRE

NOTRE DAME HOME FURNISHINGS

NOTRE DAME castle

## Ornament Order Form: Deadline December 9th @ 4:30pm

Name: _____

Address: _____

Email: _____

Phone: _____

Number of Ornaments ordered: _____

Total Amount: _____

**Honoree(s)**
In Memory of: _____

_____

**Payment Info:** Cash ☐ Chq ☐ Credit ☐ E-transfer ☐

Credit Card #: _____

Expiry (MM/YY): _____

CVV: _____

*e-transfer to **office@lionelkellandhospice.ca***

SCAN ME