Bristol Hospice
Foundation of California

Light Up A Life

Your gift of $10 or more will illuminate a light on a **Tree of Life** through December.*

NEW▸ Names and donations may be submitted online at www.bristolhospicefoundationca.org

Your Name (please print) _____

Address _____

City/State/Zip _____

Email _____ Phone _____

❑ Enclosed is my donation in the amount of $_____ ($10 or more per light*)

❑ I wish to support a Light Up A Life celebration in my loved one's name at the following level:

❑ **Tree of Life** $1,000 ❑ **Angel of Hope** $500 ❑ **Star of Honor** $250 ❑ **Dove of Peace** $100

I DEDICATE LIGHTS …

IN MEMORY OF: *(please print)*

Recognize this person as a veteran?

1 _____ ❑ yes ❑ no

2 _____ ❑ yes ❑ no

3 _____ ❑ yes ❑ no

4 _____ ❑ yes ❑ no

5 _____ ❑ yes ❑ no

IN HONOR OF SOMEONE LIVING:

1 _____ ❑ yes ❑ no

2 _____ ❑ yes ❑ no

Additional names may be submitted on the back of this form.

Please read my loved ones named at the celebration for: (choose one location)

❑ Fresno/Madera Counties (December 3) ❑ Kern County (December 2)
❑ Kings/Tulare Counties (December 1)

In order to have names read at a celebration, please return this card prior to the event date.

Please make checks payable to Bristol Hospice Foundation of California

Submit your gift and this form prior to the event date to:
Bristol Hospice Foundation, 5251 Office Park Drive, Suite 100, Bakersfield, CA 93309

For more information, call (661) 716-8000 or visit www.bristolhospicefoundationca.org

*Suggested Donation Amount