

Tree of Remembrance
Give a Gift of Light...



Remember that special someone any time of the year.

- ★ In appreciation for an individual or/group
- ★ Mother's Day/ Father's Day
- ★ Valentine's Day
- ★ Wedding/ Anniversaries
- ★ Memorials
- ★ Be kind to Someone Day
- ★ Other various occasions

The Gift of Light may be given anytime during the year. Once you enroll someone, the light in his/her honor will be lit in early December of each year.

All contributions will be designated for patient care equipment and will become a part of the volunteers' gift to Brazosport Regional Health System.

Date of contribution: _____

Please make checks payable to:

My name is: _____

Brazosport Regional Volunteers
100 Medical Drive
Lake Jackson, TX 77566

Address: _____

City: _____

Zip: _____

Amount: \$ _____

For all contributions of \$5 or more an acknowledgement will be mailed to:
...Honoree, or
...in the instance of a memorial to the persons you specify and the donor

My contribution is IN MEMORY of:

My contribution is IN HONOR of:

Send acknowledgement to:

Name: _____

Address: _____

City: _____

Zip: _____

Colored lights for honoring a living person.

The WHITE LIGHT is reserved for all memorials.