



TREE OF LIGHTS, LIGHT UP A LIFE

Name: _____

Phone: _____

Address: _____

Email: _____

City, State, Zip: _____

This is a new address

LIGHT #1

Name of Tribute (First & Last Name):

Light is from:

Send a notification of my gift to this family member/friend:

Name:

Address:

City/State/Zip:

Sponsored Amount: \$

SELECT LOCATION:

Akron/Otis

Anton/Cope

Haxtun

Idalia

Joes/Kirk

Sterling

Wray

Yuma

LIGHT #2

Name of Tribute (First & Last Name):

Light is from:

Send a notification of my gift to this family member/friend:

Name:

Address:

City/State/Zip:

Sponsored Amount: \$

SELECT LOCATION:

Akron/Otis

Anton/Cope

Haxtun

Idalia

Joes/Kirk

Sterling

Wray

Yuma

Please mail forms and money to;
Hospice of the Plains
100 Broadway Street Suite 1A
Sterling CO, 80751