

The Circle of Healing & Hope

You may purchase a paver to honor or memorialize a loved one by completing this form.

Tod may parchase a paver to no	nor or memorialize a loved one by completing this form.
Your Name	Telephone
Address	
City/State/Zip	
E-mail	Please keep my gift anonymous
Pavers are available in two sizes:	
\$500 minimum gift provides a 12"x1 (7 lines 16 characters per line, inclu \$150 minimum gift provides a 9"x6" (4 lines, 12 characters per line inclu I/we would like to provide a general	granite paver
The 12"x12" Paver 16 characters per li	ne \$500 The 9"x6" Paver 12 characters per line \$150
Line 1	Line 1
Line 2	Line 2
Line 3	Line 3
Line 4	Line 4
Line 5	
Line 6	
Line 7	
Please notify the following person of m	y/our gift:
Name	
Address	
City/State/Zip	

^{*}Please make checks payable to "The Foundation of CVPH." You may also make your donation on-line and e-mail this form to kkalman@cvph.org. If you have any questions, please call (518) 562-7169