

Yes, I would like to support compassionate care and comfort to local families. 

Enclosed is my SEASON OF HOPE gift of:

\$35 \$50 \$100 \$200 \$250 \$450 Other \$ _____

Please charge my gift to: VISA MC AMEX

Credit Card # _____ Exp. Date _____ CID _____

Signature _____

Email _____ Phone () _____

My gift is made in Memory of Honor of: _____

Please notify the following of my gift (*without specifying amount*).

Name _____

Address _____

City, State, Zip _____

For my gift of \$200, I would like the HOPE ornament Dove ornament.

For my gift of \$250 or more, I would like the following ornament. Personalization included.

HOPE ornament Dove ornament. Please etch with the following (*18 characters, including spaces*)

For my gift of \$450 or more, I would like the following **two ornaments. Personalization included.**

HOPE ornament Dove ornament. Please etch with the following (*18 characters, including spaces*)

HOPE ornament Dove ornament. Please etch with the following (*18 characters, including spaces*)

Please send the ornament(s) to the following address (*print clearly*):

Name _____

Address _____

City, State, Zip _____

For additional ornaments, include your names or phrases on a sheet of paper, enclose and mail in return envelope. To make your gift online, please visit www.hopehospice.com/hopeseason. To receive your ornament by Christmas, your order must be received by December 3. After that date we will do our very best, but your ornament may arrive after the holiday. Enjoy your ornament throughout the year.

PLEASE MAIL THIS FORM TO: Development Department, Hope Hospice, 6377 Clark Avenue, Suite 100, Dublin, CA 94568. For questions, call (925) 829-8770.