



You're Invited to the 18th Annual Hospice of Rutherford County Festival of Trees

Hospice of Rutherford County began a very special event in 1997 that continues to be a tradition for many families. The Hospice Festival of Trees gives people an end-of-year opportunity to support patient care and a perfect way to honor or memorialize loved ones during the holidays. The money raised through this event enables Hospice of Rutherford County to provide the highest quality care for terminally ill patients and their families and provide grief counseling for anyone in the community who has lost a loved one.

This year's Festival of Trees will commemorate the 32nd anniversary of Hospice of Rutherford County. The ornament for 2014 features a decorative candle (pictured above.) The names of persons honored or memorialized will be attached to each handmade ornament. These beautiful ornaments will be placed on trees at the Carolina Event & Conference Center in time for the Festival celebration the evening of Thursday, December 11th from 4:30 until 6:30 p.m. All donors are invited to view the trees and take their ornaments home for the holidays during the event.

Hospice is asking that you consider this invitation to honor or remember someone special with a much-needed and thoughtful donation for patient care. There is no minimum donation required, but please remember that Hospice must provide the materials and necessary overhead for the volunteers to make these keepsakes. The generosity of Festival of Trees participants will enable people to receive the care they want and deserve. Please complete the form below and mail it with your check to Hospice of Rutherford County, PO Box 336, Forest City, NC 28043 before December 5. PLEASE PRINT CLEARLY. For additional ornaments, use another piece of paper.

Enclosed is \$_____ for _____ # of ornament(s) for the Hospice Festival of Trees.

IN MEMORY OF: _____

PLEASE SEND AN ACKNOWLEDGEMENT TO THE FOLLOWING:

Name: _____

Address: _____

City, State, Zip: _____ Phone number: _____

IN HONOR OF: _____

PLEASE SEND AN ACKNOWLEDGEMENT TO THE FOLLOWING:

Name: _____

Address: _____

City, State, Zip: _____ Phone number: _____

DONOR'S NAME: _____

Address: _____

City, State, Zip: _____ Phone number: _____

Email Address: _____