Name:_____

Address: _____

City:_____ State:_____ Zip:_____

Telephone:_____

I would like to reserve the following:

__$ 5,000.00 (Rock) __ $ 2500.00 (Dove)

__$ 2500.00 (Acorn) __ $500.00 (Leaf)

REMEMBERANCE TREE MESSAGE (Limit to 40 Letters or Characters)

_____

_____

Example: In memory of John Doe

January 1, 1945 – February 2, 2008

Enclosed is a check: _____ which is:

__ Full Payment

__ 10% of the amount I have selected. The balance will be paid in equal amounts

during the next four (4) months. I understand that the inscription will be done only when I have completed my payment.

Please mail or drop off at:

St. Brendan Church

29 Rockaway Ave

SF CA 94127

Attn: Tree of Life

For more information, please contact the Parish Rectory at (415) 681 4225

Thank you for your support!!!

St Brendan Catholic Church

29 Rockaway Ave

San Francisco, CA 94127

(415) 681-4225

Email: SaintBrendanChurchSF@gmail.com

TREE OF LIFE

TRUST IN GOD

PROJECT