

## Memorial Bricks Order Form

Send acknowledgement to (circle one):  
Purchaser or Recipient

If brick paver is a memorial gift and you  
would like an acknowledgement sent,  
please complete:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Gift is from : \_\_\_\_\_

Your personalized message to recipient:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please make checks payable to:  
*Community Health Professionals*  
6817 State Rt. 66 North  
Defiance, OH 43512

Circle one: VISA or MasterCard

Card holder's name: \_\_\_\_\_

Credit card number: \_\_\_\_\_

Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
(last 3 digits on the back of the card) mm/yy

or donate at: [www.ComHealthPro.org](http://www.ComHealthPro.org)



## Memorial Bricks *Remembrance Path*

For more than 25 years, Community Health Professionals' Hospice has provided compassionate end-of-life care to area families.

You have the opportunity to pay lasting tribute in memory of a loved one by purchasing an inscribed brick paver, which will be part of the remembrance pathway at the Defiance Inpatient Hospice Center.

A 4" x 8" personalized brick paver is available for a \$100 tax-deductible donation to hospice, or a 8" x 8" brick paver for a \$350 tax-deductible donation.

Bricks may be purchased in memory of loved ones who have been served by either the in-home or inpatient hospice program, OR in honor of individuals, businesses or organizations.



## Memorial Bricks *Remembrance Path*



**Community Health  
Professionals**

**Defiance Inpatient Hospice Center**

6817 St. Rte. 66 N., Defiance • 419-782-4131

[www.ComHealthPro.org](http://www.ComHealthPro.org)



# Memorial Bricks

## Remembrance Path



Brick pavers are part of the courtyard walk located behind the Inpatient Hospice Center. Each patient room overlooks this courtyard, which includes two decorative ponds, trees and rolling hills. Walkways are used by patients, family members and guests and lead past a gazebo, around the building.



## Memorial Bricks Order Form

Your Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Date: \_\_\_\_\_

4" X 8" Brick - \$100.00  
*tax-deductible donation*

Quantity of 4x8 bricks \_\_\_\_\_  
 (one form per brick order)

Brick can accommodate 3 lines of text  
 with up to 13\* characters per line  
 (\*One character per space – include spaces and  
 punctuation when calculating each line)


8" X 8" Pavers - \$350.00  
*tax-deductible donation*

Quantity of 8x8 pavers \_\_\_\_\_  
 (one form per paver order)

Brick can accommodate 6 lines of text  
 with up to 13\* characters per line.  
 (\*One character per space – include spaces and  
 punctuation when calculating each line)

Logo inscription is available for an additional  
 charge. Please call 419-782-4131 for pricing.


Donate online at:  
[www.ComHealthPro.org](http://www.ComHealthPro.org)