

Hope Lights A Tree Participation Form

When giving for more than one ornament, please list all information for each ornament on a separate form or sheet of paper.

(Please Print Clearly)

I wish to give an ornament: _____ In honor _____ In memory

Of _____
(Name as it should appear on ornament)

Given by

Amount enclosed \$ _____

Please make check payable to: The Wells County Foundation, Inc.

I want an acknowledgment of my gift (excluding the amount) sent to:

Name: _____

Address: _____

City : _____

State: _____ Zip: _____

Acknowledgement should be signed:

Name: _____

Address: _____

City : _____

State: _____ Zip: _____

Phone _____

Return this form to **The Wells County Foundation, Inc. 222 W. Market Street, Bluffton, IN 46714**

Thank you for your thoughtful gift.