

# *Shine a light in honor or memory of your friend or loved one.*

Middlesex Health Hospice Program invites you to purchase a light for our Tree of Lights. Each light on the tree will shine in honor or in memory of a friend or loved one.

Enclosed is my donation of \$\_\_\_\_\_ for \_\_\_\_\_ lights. (A \$5 minimum donation is suggested per light.) Checks should be made payable to Middlesex Hospital. To ensure that your loved one's name appears on the printed display, please return by **November 19, 2020.**

In memory/honor of:

In memory/honor of: \_\_\_\_\_

For additional names, please print on back of this form. You may also purchase your light online at **MiddlesexHealth.org/TreeofLights.**

Your name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ email \_\_\_\_\_



Please complete the section above, and mail to:

Middlesex Health  
Office of Philanthropy  
28 Crescent Street  
Middletown, CT 06457



The Tree of Lights ceremony will be recorded and available to view on [MiddlesexHealth.org/TreeofLights](http://MiddlesexHealth.org/TreeofLights) after December 8, 2020.

The Smarter Choice for Care  
**M+** Middlesex Health  
Hospice Program