

Please print or type. Once complete, please return this form to the Parish Office. Contact us if you have questions or need assistance in completing this form.

Tree of Life - Acorn

Primary Donor Information

Name

Address		City	Province	Postal Code
Telephone (Home)	Telephone (Other)	Email		

Donation Information

Please accept this donation in the amount of \$

Donation made by <input type="checkbox"/> Cash (in-person visit to the Parish Office only) <input type="checkbox"/> Cheque (payable to Corpus Christi Parish) <input type="checkbox"/> Credit Card (complete section to the right)	Please charge my <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	
	Name on Card	Expiry Date (mm/yyyy) /
	Card Number	CSC Number*

* 3 digit number on back of card

Multiple Donor Information

If there is more than one donor, complete the Multiple Donor sheet and attach to this form. The primary donor listed above will be the contact person. Please note, that the Acorn will not be engraved until the donation is received in full. The total amount from all donors is to equal \$750.

Payment Plan

The first payment reserves your Acorn, and is due at the time of order. The Acorn will not be engraved until the donation is received in full.

Date of First Payment	Number of Payments	Amount of Each Payment	Date of Last Payment
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Tax Receipt Information

We issue tax receipts for all donations we receive. The receipt will be mailed when the donation is received in full to the donor(s) named above.

please turn over ➡

Engraving the Acorn

Step 1. Please select the occasion you are commemorating:

<input type="checkbox"/> Birthday	<input type="checkbox"/> Marriage	<input type="checkbox"/> Anniversary
<input type="checkbox"/> Ordination	<input type="checkbox"/> Religious Profession	<input type="checkbox"/> In Memory
<input type="checkbox"/> Family	<input type="checkbox"/> Church Group/ Ministry	<input type="checkbox"/> Other* _____

*subject to approval by Tree of Life Committee

Step 2. In BLOCK LETTERS print the first and the last name of the individual, couple, family name or church group/ ministry name being engraved (maximum 25 characters including spaces):

Step 3. For a Birthday or Anniversary, please indicate the year being celebrated (eg. 50th, 75th, 100th), along with the date of the occasion:

_____		_____	_____	_____
year celebrated		day	month	year

Step 3. For a Marriage, Ordination or Religious Profession, please indicate the date of the occasion:

_____	_____	_____
day	month	year

Step 3. For In Memory, please indicate the year of birth and the year of death, or leave blank for a name remembrance only:

_____	_____
year of birth	year of death

Step 4. In BLOCK LETTERS please indicate the message you wish to include (maximum 3 lines of 25 characters each including spaces; for a Family Name or Church Group/ Ministry maximum 5 lines of 25 characters each including spaces):

Acorn Selection & Placement

Please return this completed form, with the donation or first payment, to the Parish Office. At that time, if you so desire, you may select the location of the Acorn you wish engraved. You will be contacted when the Acorn has been engraved and placed on the Tree of Life.

For Office Use

Reference Number	Date Received	Received By
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