

MEMORIALS

To order a memorial please mark an "X" in the space of the Memorial desired.
PLEASE PRINT the information below, as you wish the inscription to read:

MEMORIAL WALK:

- 12" x 12" Granite Brick (Up to 5 Lines) \$1,000
 6" x 6" White Bronze Brick (Up to 4 Lines) \$500
 Memorial Walk Donor Board Inserts (Up to 3 Lines) \$150

OUTDOOR CHAPEL, GROTTOS AND GARDEN:

- 5-1/2" x 13" Red Bronze Plaque (Up to 4 Lines) \$1,000
 3-3/4" x 9-1/4" Red Bronze Plaque (Up to 3 Lines) \$500
 Memorial Board Inserts \$150

Grottoes:

- | | |
|---|---|
| <input type="checkbox"/> Outdoor Pieta Chapel | <input type="checkbox"/> St. Faustina Secretary of Divine Mercy |
| <input type="checkbox"/> Our Lady of Lourdes | <input type="checkbox"/> Holy Family |
| <input type="checkbox"/> Our Lady of Guadalupe | <input type="checkbox"/> Crucifixion |
| <input type="checkbox"/> Our Lady of Czestochowa | <input type="checkbox"/> Holy Sepulcher |
| <input type="checkbox"/> Our Lady of Fatima | |
| <input type="checkbox"/> Assumption of the Blessed Mother | |

Garden:

- St. Theresa, the Little Flower

STATIONS OF THE CROSS:

- 3-3/4" x 9" Red Bronze Plaque
 Station Number (1-14) \$500.00

CHECK ONE: In Memory In Thanksgiving

Name or Names

City and State

Name (Person Ordering) _____

Address: _____

City, State & Zip: _____

Phone # () _____ Email: _____

Date: _____

Amount Enclosed: \$ _____

Please mail this completed form to the Shrine. We will send a copy to you for your records.

Thank you and God Bless!

PERPETUAL MASS REMEMBRANCE

Name of person to be enrolled (if deceased mark "†")

Enrollment requested by: _____

Send Folder to the following address:

Name _____

Address _____

City _____ State _____ Zip _____

Suggested Offering - \$100

Amount Enclosed _____

(100 Masses are offered each year for all enrolled)