

Memorial Hall at the Church of the Nativity in Bethlehem

Participation Form- 'Memorial Plaque'

Please print clearly in order to avoid errors!

Order No. _____ Date: _____ / _____ / _____

Family Full Name: _____

Full Address: _____

City: _____ State: _____ Country _____

Telephone: _____ Fax: _____ Email: _____

The Commemorative Plaque should read as follows:

Full Name: _____

City: _____ **State:** _____ **Country:** _____

Payment Details

The fee for a commemorative plaque is US\$595.

A Check **credit card**
 Visa Master Card American Express Other (please state) _____

Credit Card No. _____ Expiration Date _____ / _____

Name and signature of person placing the order: _____

I ask that a candle be lit in the name of _____ and that the following prayer be read by the Franciscan Fathers at the Church of the Nativity:

Funeral Home Name: _____

Full Name of person placing the order: _____

City: _____ State: _____ Country _____

Telephone: _____ Fax: _____ Email: _____