



FAIRHOPE
HOSPICE & PALLIATIVE CARE
HOME OF THE PICKERING HOUSE

30TH ANNUAL TREE OF REMEMBRANCE

Orders due by 11.1.2026 to assure delivery for tree lighting ceremony.

Order Form

Please print clearly

Your Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

ORNAMENTS \$25 EACH

Ornament Personalization

Customized with loved one's **name only**.

Name

Quantity

Total

Pick up

Ship

Place on Tree

_____	_____
_____	_____
_____	_____



Shipping available for anyone outside of Fairfield County. Ornaments will ship after 12/31/26 unless otherwise requested

☐ I do not wish to purchase an ornament but would like to make a donation in honor/memory of my loved one(s)

\$25 _____ \$50 _____ \$100 _____ Other \$ _____ Grand Total: \$ _____

My donation is in : Memory / Honor of: _____
Circle one

I have enclosed my check made payable to: **FAIRHOPE Hospice**

Please bill my credit card:



Cardholder Name: _____

Card # _____

Exp. Date _____ / _____

Customer Signature _____

**Return order form to FAIRHOPE Hospice and Palliative Care
282 Sells Rd., Lancaster, OH 43130**

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