



ORDER FORM

COMMEMORATIVE ROSARIES

Funeral Home
or Contact Person _____

Address _____

City _____ State _____ Zip _____ Telephone _____

Name of Deceased _____

Information to be engraved _____
(maximum 20 characters)

Item Name	Quantity	Mark with an X if item is to be engraved	Chain Length 16, 18, 20 22, 24	Bead Color	Item Price	Total
ENGRAVING						
Subtotal						
Please add \$6.00 if order is to be returned by mail.						
TOTAL						

NOTE Please send only the flower petals.
Flower petals can be placed in a large paper envelope or a box. **NO PLASTIC!**
Flowers can be fresh or dried.
All orders will be completed in four weeks.
Payment may be in the form of a Personal Check or Money Order.
Sorry, we do not accept credit cards.