Please mail your completed order form to:

Angel of Hope Memorial Garden c/o Christie Hoffman 11618 6th St. Milan, IL 61264



Angel of Hope Order Form													
Name													
Address													
City, State, Zip													
Email Address													
Telephone													
4" x 8" Brick \$10		Inscription Limits: 13 Characters per line (Including spaces & punctuation, 1 to 3 lines)											
8" x 8" Brick	8" x 8" Brick \$20		Inscription Limits: 13 Characters per line (Including spaces & punctuation, 1 to 6 lines)										
Inscription on 4													

Please call (309) 781-9074 with questions or for more information

Please makes checks payable to: Angel of Hope Memorial Garden