

I WISH TO CONTRIBUTE TO THE FESTIVAL OF TREES
IN THE FOLLOWING WAY:

- Festival Star @ \$10,000 or above: Amount \$ _____
- Festival Sponsor @ \$5,000–9,999: Amount \$ _____
- Festival Benefactor @ \$2,500–4,999: Amount \$ _____
- Festival Patron @ \$1,000–2,499: Amount \$ _____
- Festival Angel @ \$100–999: Amount \$ _____
- Festival Friend @ \$25–99: Amount \$ _____
- Tree Sponsor @ \$100/foot: Amount \$ _____
- Cash Donation: Amount \$ _____
- Contact me regarding an ad in the program book.
- Matching Gift: enclose employer's matching gift form.

Employer: _____)

Contributor (listing for Program Book) _____

Contact Name (if different from Contributor) _____

Address _____

Phone _____

Email _____

Date _____



Please return this form with your check payable to
Friends of Cranberry Hospice. Thank you.

P.O. Box 1555 • DUXBURY, MA 02331-1555