

Butterfly Release Purchase

Saturday, May 26, 2018
City Park, Kingston

PLEASE PRINT

First Name: _____

Last Name: _____

Address: _____

City/Town: _____

Postal Code: _____

Phone: _____

Email: _____

Cash Cheque Visa MC

Card #: _____

Signature: _____

Number of Butterflies: _____ \$25 each

Total \$: _____

Thank you for your support of Bereavement Services.

