

## **Memory Bricks**

With the cooperation of the Iron County Hospital Committee, the bricks will be placed in an area around the Hospital that has been designated as a Memory Garden.

## **GUIDELINES FOR ENGRAVING**

- Maximum of 4 lines per brick, not to exceed 15 characters or letters per line.
- Choice of engraved message
  is subject to approval of the
  Hospital Brick Committee.
  Line one will state
  "In Memory of" or "In Honor of"
  Lines 2 and 3 may include names,
  and line 4 will include a date,
  birth, death or current date.
- Bricks will be set in concrete in the hospital garden, at least annually.

## SAMPLE OF ENGRAVED BRICK

In honor of John and Mary (Smith) Clarkson March 2008

Plant a permanen	t reme	mbran	ce by	purch	asing	a brick	c for Ir	on Co	unty F	Hospita	al's "M	lemor	y Gard	den".	
Name															
Mailing address															
Town or City															
State	<u>.</u>	Zip Code													
Phone number															
E-Mail address															
Memory Bricks are	e \$75.0	00 eac	h. To	tal am	ount e	enclos	ed: \$	;							
This is what I want engraved on my brick: (Complete a new form for each brick ordered. Each line has a total of 15 boxes, use 1 space between words															
such as I	N	Caci	Н		N	0	R		0	F	3, 430	Тэра		WCCII	Words
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Make Checks Payable To: Iron County Hospital Foundation

Mail to: Iron County Hospital Memory Garden P.O. Box 548 Pilot Knob, MO 63663