Tree of Love Order Form

Accepting donations through Dec. 29

Tree(s) – \$100 Poinsettia(s) – \$25 Bulb(s) – \$5
Your namePhone
Your address
City State ZIP
Email
Paying by check: Make payable to Genesis Volunteers.
Paying by credit card:
☐ Visa ☐ MasterCard ☐ Discover ☐ American Express
Name on card
Credit card number
Expiration dateThree digit code\$ Total
Tree(s) – \$100
Purchased in memory or in honor of (circle one)
(first name) (last name)
To send an aknowledgement, please complete:
Name Address
CityStateZIP
Where would you like your tree(s)?
☐ Hospice ☐ Hospital ☐ Cancer Care Center ☐ Coshocton Medical Center
Poinsettia(s) – \$25 (For display in Hospital main lobby)
Purchased in memory or in honor of (circle one)
(first name) (last name)
To send an aknowledgement, please complete:
Name Address
CityStateZIP
Bulb(s) – \$5 (For display on Tree of Love)
Purchased in memory or in honor of (circle one)
(first name) (last name)
To send an aknowledgement, please complete:
Name Address
City State ZIP
Return tree donation request by November 15 to ensure proper placemen

Mail this donation form to: Tree of Love, Genesis Hospital Volunteers 2951 Maple Ave., Zanesville OH 43701