

Heartfelt Children's Memorial Brick Order Introduction

We are honored that you have chosen the Heartfelt Children's Memorial to host the memory of a child for all time.

New bricks are etched every Spring and are dedicated at the Heartfelt Children's Memorial Annual Remembrance which takes place on the Sunday of Memorial Day weekend. All are invited to join us to remember and celebrate the lives of our children, followed by refreshments and fellowship.

Please read the following information carefully before submitting your order form and payment.

How am I eligible for a brick?

Any child ranging from unborn to adulthood, who has one living parent when the child passed, may be remembered with one brick on the Children's Memorial walls.

- Multiple names on one brick are allowed.
- The Memorial bricks are designed for letters, spaces, dashes (-), slashes (/), and numbers only.
- Each line can accommodate 18 characters and spaces.
- The form and full payment must be received by March 1st. All bricks payments and forms received after this date will be etched the following year.
- A Memorial Brick consent proof will be sent to the parent for approval prior to etching.
- If being purchased by a donor:
 - Parents will receive an introductory letter with the brick size and suggested inscription. The parent will approve or edit the inscription to be etched on the brick.

Memorial Brick Order Forms and payment can be mailed and written to:

Heartfelt Inc. P.O. Box 201 Seward, NE 68434

Memorial Brick Order Form



Sevara, WE																					
I am:	The Parent A Donor	arent A Donor Brick Information																			
Would you like a tax deductible form?				4" x 8" Three lines of text \$125								8" x 8" Six lines of text									
Parent Information		N/	lake c	hecks	s nava	hle t	٥.		31	X IIIIC	30110										
Name:		Make checks payable to: Heartfelt Inc. \$25									250										
	First / Last Street	Inscription A proof will be sent to the parent(s) for final approval .																			
	Street																				
- Dhana #:	City / State / Zip																				
-																					
Donor Information																					
	I wish to remain anonymous to the family																				
	l wish to be contacted for a follow-up																				
Name:		Child's Full Name																			
Address:	First / Last	Birth Date									A	Angel	Date								
_	Street	Spec	cial Ins	struct	ions																
_	City / State / Zip																				
Phone #: _																					
Email: _																					
ple	lf more than one donor, ease attach additional information on a separate page.																				

Address: P.O. Box 201, Seward, NE 68434 Web: HeartfeltSeward.org Email: info@heartfeltseward.org Phone: (402) 803-1771