



2017 Wreath Registration

IF DONATING MORE THAN ONE WREATH, PLEASE FILL OUT A SEPARATE FORM FOR EACH

Name of your wreath: _____

Description of wreath or theme: _____

Wreath size (no larger than 30"): _____ Please suggest a price for your wreath* _____

**Calvert Hospice reserves the right to determine the price but we would appreciate your guidance as to the amount of time and the price of the materials you put into your wreath.*

Name to include on wreath signage (Donated by...) _____

Contact name: _____

Address: _____

Phone: _____ Email: _____

All forms must be completed & returned no later than **November 1, 2017**. Please return form to:

Calvert Hospice Festival of Wreaths
PO Box 838
Prince Frederick, MD 20678
Fax: (410) 535-5677
Email: FOW@calverthospice.org

Any questions please contact Calvert Hospice at FOW@calverthospice.org or call 410-535-0892.