

# SANCTUARY FLOWER REQUEST

Date Desired: \_\_\_\_\_

Name: \_\_\_\_\_  
(Please print)

Phone Number: \_\_\_\_\_

Dedication as you wish it printed in church bulletin:

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Please check one:

The Flower Committee would prefer that you:

☐ provide your own floral arrangement and delivery of the flowers.

Or the Flower Committee will have:

☐ a member of the Flower Committee arrange flowers.  
(\$20 donation)

Please make your checks payable to

Brecksville United Church of Christ, Flower Fund

Please check one:

☐ I will leave the flowers for the Pastor to distribute.

☐ I wish to keep the flowers and will arrange to pick them up after the last service. (Please return containers to the church office.)

Please print your name after the date desired on the flower chart and place this form in the pocket beneath the chart.