



Angel Tree

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Please consider purchasing an angel in Memory of or in Honor of someone special to you

Each angel is a minimum donation of \$25

It will be displayed on our tree in December at the entrance to

CHRISTUS VNA Hospice at

5253 Prue Road, Suite 100C

**Your angel gift helps the Mission of Friends of Hospice by providing funds
to care for uninsured hospice patients**

The names of the individuals are listed below as I wish them to appear on the angel tree
(please continue on back to add more names or to let us know if you want someone to be notified of your gift)

In Memory of

In Honor of

Your Name _____

Address _____ City _____ Zip Code _____

Phone _____ If you prefer to pay by phone, please call 210-785-5852

Total Enclosed \$ _____ for Number of Angel(s) _____

Payment method

() My check is enclosed, payable to Friends of Hospice San Antonio
PO Box 40487, San Antonio, TX 78229

Please charge my (circle one) VISA MasterCard American Express Discover

Name on credit card _____ Code _____

Card # _____ Exp. Date ____/____