

Name of Person to Honor:

(1 name per lantern)

Choose one:

- In Loving Memory of
- In Honor of Survivor

Photo Options: Deadline September 30th

- 1) No photo on lantern - Name only
- 2) I will supply photo for the lantern
- 3) I will email photo and form to:
Holly@OjaiCARES.org
(PDF or Jpeg, 300dpi, B&W or Color)
- I will drop off photo to OjaiCARES
- I will mail photo and form to:
OjaiCARES, 960 East Ojai Ave,
Suite 105, Ojai, CA 93023

Your Name: _____

Address _____

Phone _____

Email _____

\$100.00 Paid By: Check

Credit Card: Visa MC AX

Card# _____

Exp Date _____ CVV# _____

Name on Card _____

Signature _____

Additional order forms available
online at: OjaiCARES.org
One order form per lantern.