



In Loving Memory

Remember a loved one in a truly unique way, by purchasing a memorial leaf on the Rotary Club of Toowoomba Garden City Inc Eternity Tree, located in the beautiful garden setting at Burstows Funerals.

The solid bronze Tree consists of 574 individually designed leaves that can be purchased in memory of a relative or friend for \$195 each.

After purchase, the leaves are inscribed (2 lines, with an additional 2 lines available at \$30/line) and restored to the tree, where they will be preserved in the magnificent outdoor setting for posterity.

Proceeds from the donations of the Eternity Tree leaves go to the Toowoomba Hospice Association Inc.

Remember a loved one and help Rotary to assist the Hospice in providing dignified care in a home-like setting.

**For further information:
contact Burstows on 4636 9600**



ROTARY CLUB of
TOOWOOMBA GARDEN
CITY INC



Enquiries and applications to: Burstows Funeral Care – 1020 Ruthven Street, South Toowoomba, Q, 4350

Date of Application: _____

1. Details of your inscription on the leaf

(please write the inscription you wish to appear on your Leaf, noting all inscriptions will be in upper case)

First Line		\$195.00	Max per line <i>including spaces</i> Line 1: 19 Line 2: 22 Line 3: 28 Line 4: 19
Second Line			
Third Line		\$30 extra	
Fourth Line		\$30 extra	

- Selection 1 **\$195.00** – includes two (2) lines on the leaf
- Selection 2 **\$225.00** – includes three (3) lines on the leaf
- Selection 3 **\$255.00** – includes four (4) lines on the leaf

2. Details of the Donor (please complete the details of the person arranging the leaf)

Name of Donor

Title
First Names
Last Name

Address

City/Town P/Code

Contact Phone Mobile

Signed by Donor Date

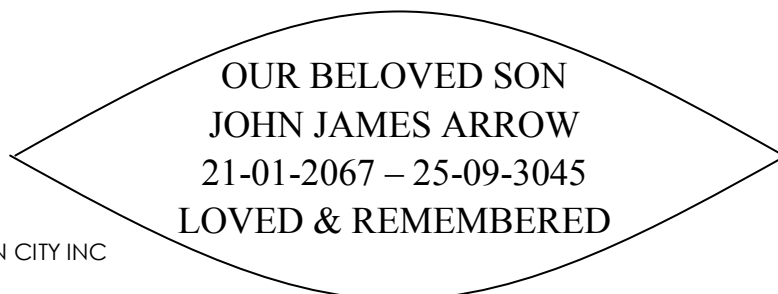
3. Payment Details (please select the method of payment)

- Cash Cheque – to be made payable to “Rotary Club of Toowoomba Garden City”

Example leaf contains four lines, standard leaf contains two (top and bottom line can be curved)



ROTARY CLUB of
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OFFICE USE ONLY

Date of Application:	Allocated Leaf Number	Receipt Number	Amount
	<input type="checkbox"/> Top <input type="checkbox"/> LHS <input type="checkbox"/> Centre <input type="checkbox"/> RHS		\$
<input type="checkbox"/> Recorded _____	<input type="checkbox"/> Ordered _____	<input type="checkbox"/> Received _____	<input type="checkbox"/> Installed _____
<small>Date & Initials</small>	<small>Date & Initials</small>	<small>Date & Initials</small>	<small>Date & Initials</small>