FOOTPRINTS INTO THE FUTURE

A very special way to recognize and celebrate the children in your life...

Community Medical Center's "Footprints Into The Future" wall is a wonderful way to pay tribute to your child, grandchild or other baby in your life. Whether your child was born at Community or somewhere else, commemorate their birth and join Footprints Into The Future as a lasting tribute for all to see.

Footprint plaques are available in three sizes. They will be displayed on our maternity unit, and will be inscribed with the child's name and birth date.

Simply complete the form below and return it to the Community Medical Center Foundation along with your payment. You will be notified when the plaques have been installed.

All proceeds will benefit maternity services at Community Medical Center.

For more information, please contact the Community Medical Center Foundation at (732) 557-8131 or visit us on the web at www.cmc-foundation.org.

To join "Footprints Into The Future"
please complete the form below and send it with your credit card information or a check made payable to:

Community Medical Center Foundation
Attn: Footprints Into The Future
99 Highway 37 West • Toms River, NJ 08755
732.557.8131 • Fax: 732.557.2398

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

○ I would like to join "Footprints Into the Future"

Footprint Size	Quantity	Cost	TOTAL
3" x 4"	_____	$150	_____
3.5" x 4.15"	_____	$250	_____
4.5" x 5.34"	_____	$500	_____
Total Amount:		$ _____	

Please charge my ○ Visa ○ MasterCard ○ American Express ○ Discover

Card # _____ Exp. Date: _____

Signature: _____ Sec Code _____

Name as it appears on card: _____

Address of Cardholder: _____

City: _____ State: _____ Zip: _____

Inscription:
Footprints are inscribed with one child's name and birth date only. Please indicate how you would like your footprint(s) inscribed. If you are sponsoring more than one, please include a separate sheet with each inscription.

Please print
Child's Name: *First* _____

Last _____

Child's Birth Date: _____

Community Medical Center Foundation
Barnabas Health

304-4/12

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