

2009 Broward Butterfly Release



On Sunday, March 8, from 1:00 - 3:00 pm, HospiceCare of Southeast Florida, Inc. will host the annual commemorative butterfly release, "Set the Butterflies Free," a tranquil display of life and remembrance of those we love and lost. Please join us in the gardens at HospiceCare of Southeast Florida, 309 S.E. 18th Street, Fort Lauderdale. Guests will have the opportunity to share and support each other as light refreshments are served.

"The butterfly release is a beautiful way to reflect on the happy memories of our loved ones who have passed and to celebrate the present. We invite everyone to this beautiful event and to visit our Forget-Me-Not Center," states Susan Telli, CEO. Hundreds of butterflies are released simultaneously as the memories are shared between families and friends.

A donation is accepted for each butterfly released which is accompanied by a commemorative butterfly lapel pin and acknowledgement card sent to the designated recipient. This is an ideal way to remember family and friends. For additional information, please contact 954-HOSPICE or (954) 467-7423. You may also find information on our website at www.hospicecareflorida.org



To participate, please complete the following form:

My gift is in honor/memory of:

Your name _____
Address _____
City, State, Zip _____
Phone _____
Email _____

Send a butterfly pin with receipt Just send receipt

I would like to enroll _____ names for the Butterfly Release at \$35.00 each, to remember and honor a loved one.

Enclosed is:	\$ _____
I would like to support the work of HospiceCare with an additional contribution of:	\$ _____
Total Enclosed:	\$ _____

Checks written out and mailed to:
HospiceCare of Southeast Florida, Inc.
309 SE 18th Street - Fort Lauderdale, FL 33316-2817

Mastercard / Visa / American Express

Cardholder _____
Card # _____
Amount _____
Expiration _____
Signature _____

*A portion of your contribution may not be tax deductible due to services rendered. Please consult with your tax advisor.

For questions and information, call:

(954) 467-7423 or (800) 372-1757

To enroll additional names, photocopy this form or send along details on a separate sheet of paper

1. _____

Name to be Honored/Remembered

*To let someone know of your generous gift-
Please notify:*

Name

Address

City/State/Zip

2. _____

Name to be Honored/Remembered

*To let someone know of your generous gift-
Please notify:*

Name

Address

City/State/Zip

3. _____

Name to be Honored/Remembered

*To let someone know of your generous gift-
Please notify:*

Name

Address

City/State/Zip