



## Flower Request Form

Date request is for: \_\_\_\_\_

If another arrangement is already scheduled for the date requested please:

- Provide a matching arrangement
- Notify me so that an alternate date may be selected

**Dedication:** *To the Glory of God and*

- In loving memory of \_\_\_\_\_
- In celebration of \_\_\_\_\_
- In honor of \_\_\_\_\_

Given by: \_\_\_\_\_

Disposition:       To Shut-in       Will take

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

The cost of each Sunday flower dedication is \$35.  
Completed form and payment must be sent to the church's attention with a notation  
"Flower Fund" and be received a minimum of 3 weeks prior to the requested date. Mail to:

**First Congregational Church  
United Church of Christ  
31 Maple Street  
Bristol, CT 06010**

*Thank you.*

*Please call the Church Office with questions - 583-6597.*