

# Enrollment Form

# Names to be Celebrated:

All names to be commemorated will be accepted up to the time of the celebration on June 17th (rain date June 24th). Deadline for inclusion in the printed event journal is June 10th.

## Method of Payment

\*Form may be completed on our website - [www.aldersgateumc-eb.org](http://www.aldersgateumc-eb.org)

- Check - Made Payable to Aldersgate UMC
- Visa
- MasterCard
- American Express

1. Please read my loved one's name at the Butterfly Release Celebration.

*\*Please return this section with your payment.*

Your Name \_\_\_\_\_

Your Name \_\_\_\_\_

Address \_\_\_\_\_

Send my acknowledgement card and pin to:

\_\_\_\_\_

Name \_\_\_\_\_

Phone (      ) \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

\_\_\_\_\_ Number of names enrolled (\$12.00 each name) in the Butterfly Release Celebration

2. Please read my loved one's name at the Butterfly Release Celebration.

Send my acknowledgement card and pin to:

\$ \_\_\_\_\_

Name \_\_\_\_\_

I would like to make a donation to the efforts of the Crisis Room and other ministries of Aldersgate United Methodist Church

Address \_\_\_\_\_

\$ \_\_\_\_\_

3. Please read my loved one's name at the Butterfly Release Celebration.

Send my acknowledgement card and pin to:

\$ \_\_\_\_\_ Total

Name \_\_\_\_\_

Address \_\_\_\_\_



## Thank you for your support!

Completed Enrollment forms must be returned to:  
Aldersgate United Methodist Church  
Butterfly Release  
568 Ryders Lane  
East Brunswick, NJ 08816

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