## Create Messages With Chalk In Front Of Your Luminary!

Let's light up the town of Manasquan in remembrance!

Chalk will be available at information table in front of Manasquan Lighting on Main Street

# Light a Life Walk of Remembrance

TO BENEFIT COMMON GROUND GRIEF CENTER



DATE: Saturday, November 25th, 2023

Raindate December 2<sup>nd</sup>, 2023

WHERE: **Downtown Manasquan** 

TIME: Between 4pm-8pm

DONATION FOR LUMINARY: \$10.00

WHAT IS IT? Purchase a luminary in memory or honor of a special person. We will include the name of that person on the luminary. Luminaries will be lit and displayed along the streets of downtown Manasquan. Stroll the town anytime between the hours of 4-8pm.



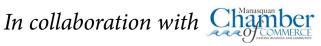
### Sponsored By



#### Three easy ways to order luminaries:

- 1. Online at: https://commongroundgriefcenter.ejoinme.org/SQUANLAL23
- 2. Make a check payable to Common Ground and mail to: Common Ground, 67 Taylor Ave., Manasquan, NJ 08736
- 3. Visit Squan Family Dentistry at 54 Broad St., Manasquan
- 4. Visit Bouquets To Remember at 123 Main St., Manasquan

Together, in remembrance, we can light up the town of Manasquan



Common Ground Grief Center is a 501(c)3 nonprofit organization which provides on-going peer support groups for children, teenagers and their families who are grieving the loss of a parent, sibling or friend. The Center provides services free of cost to all participating families. Common Ground is supported solely by private donations through individuals, corporations, foundations, grants and fundraisers.





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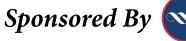
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#### Light a Life, Walk of Remembrance Order Form

First Name Address			Last Name	
			City	
State	Zip Code	Telephone Number	Email Address	
In Memory Of:			In Honor Of:	
1			1	
2			2	
3			3	
4			4	
5			5	<del></del>
		Please use the back of	sheet for additional names	
	Quanti	ty: <b>X</b> \$10.00	= Total Amount Due:	-
метно	D OF PAYMENT	(please select from below):		
□ CASH		(P)	☐ CHECK (Please make payable to: C	ommon Ground)
□ CRED	OIT CARD (please s	select one):   American Express	S □ Visa □ Mastercard □ Discover	
Name or	n Card			
Credit C	Card Number		Exp. Date	CVC#
Billing Address (If different than above)			Billing Zip Code	

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In collaboration with Chamber



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