



PINE HILL CEMETERY ASSOCIATION

1530 E 39TH ST

DAVENPORT IA 52807

(563)-391-5130

A Non-Profit Cemetery Association

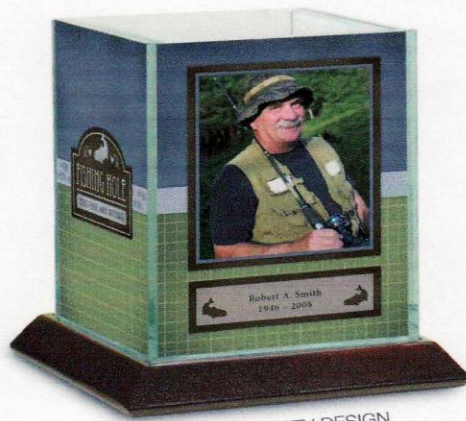
CARING FOR THE QUAD CITY COMMUNITY

www.pinehillcemeterydavenport.com

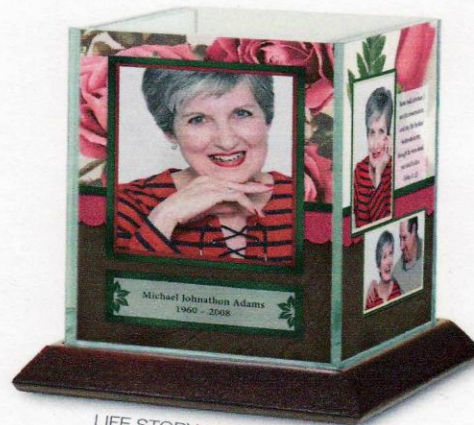
LIGHTING THE PATH TO COMFORT & PEACE

Each LIFE JOURNEY CELEBRATION CANDLE is hand made of beveled glass and a beautiful wood base with a cherry finish. Each candle is filled with 100% all natural wax that is friendly to our environment and will burn for over 100 hours. The Life Journey Celebration Candle is very flexible. With

a variety of themes to choose from and the ability to use one photo or multiple photos, the Life Journey Celebration Candle can be a lasting tribute for your family. You can even put a prayer or poem on the back. Make it as simple or as personalized as you wish!



SERENITY DESIGN



LIFE STORY DESIGN

The Life Journey Celebration Candle offers a wide variety of customizing options. Available designs include:

1. LIFE JOURNEY – This style provides customers with the most options and multiple customizable areas to document a loved one's life. Including, 4 personal photos and 3 journal locations.
2. SERENITY – This design allows for the simplest and easiest form of customization while still offering a personalized candle. All that is required to complete this personal tribute is the placement of one photo and one journal area.

The Life Journey Celebration Candle is also available in special event themes like the one shown below.



Available themes include:

- Baby Boy & Baby Girl
- Wedding Day
- Paw Pals
- Our Love (Anniversary)



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Please select from the themes below and specify candle style (Serenity or Life Journey) and the quantity you would like:

Memorial Themes	Style	Quantity
A Golfer's Life	_____	_____
Autum Leaves	_____	_____
Butterfly Wings	_____	_____
Cascading Glory	_____	_____
Coastal Light	_____	_____
Going Home	_____	_____
Gone Fishing	_____	_____
Hunting Season	_____	_____
Majestic Eagle	_____	_____
Memorial-Cool Tones	_____	_____
Memorial-Natural Tones	_____	_____
Patriotic	_____	_____
Rays of Light	_____	_____
Scenic Retreat	_____	_____
Seaside Paradise	_____	_____
Sweet Pink Roses	_____	_____
Sweet Roses	_____	_____
The Early Years	_____	_____
Up Above	_____	_____
Watching Over	_____	_____
Working the Land	_____	_____

Occupation _____

SPECIAL EVENT THEMES

	Style	Quantity
Baby Boy	_____	_____
Baby Girl	_____	_____
Our Love (Anniversary)	_____	_____
Paw Pals	_____	_____
Wedding Day	_____	_____

CONTACT AND PAYMENT INFORMATION:

First Name MI Last Name

Street Address

City State Zip

PAYMENT TYPE:

Credit Card Check Cash

Visa MasterCard Discover

Card Number

Expiration Date

3 digit code

Name on Card

Card billing address if different:

Street address

City State Zip

Signature to charge card

CANDLE INFORMATION:

First Name MI Last Name

Dates: Wedding _____

Birth _____

Death _____



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Please fill out information for each applicable side of your custom candle:

SIDE 1 – LIFE STORY DESIGN

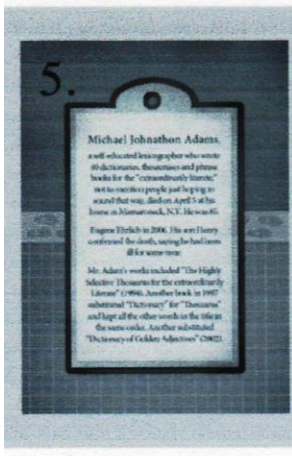
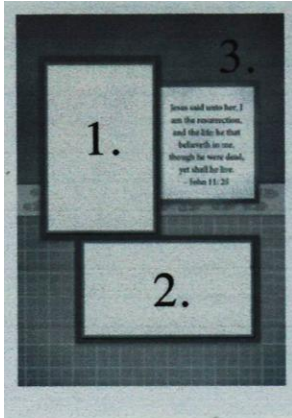
1. Photo Description: _____
2. Photo Description: _____
3. Journaling/Quote/Scripture: _____

SIDE 2 – LIFE STORY DESIGN

4. Photo Description: _____

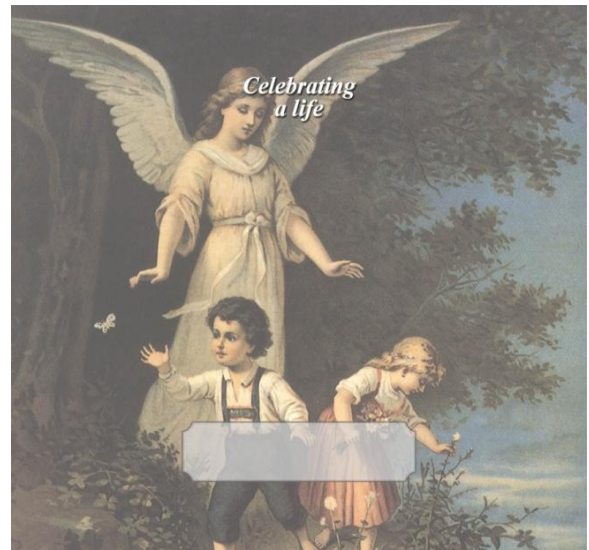
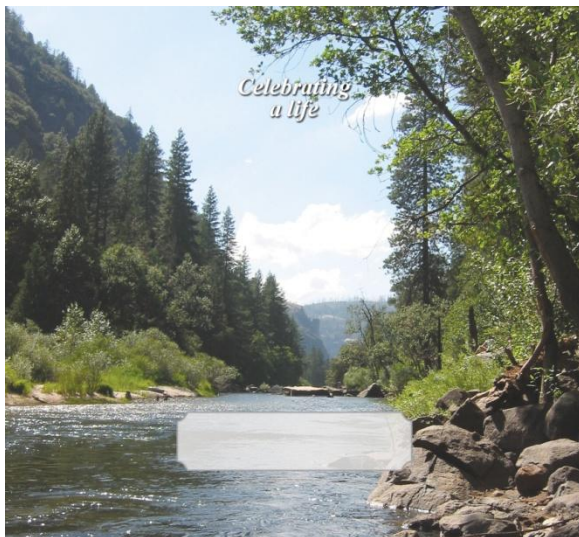
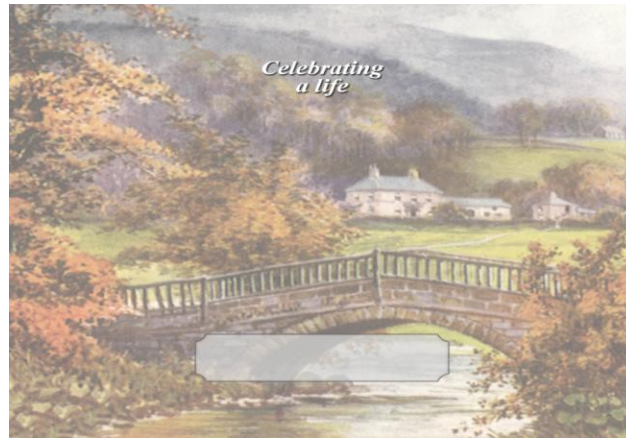
BACK – ALL DESIGNS

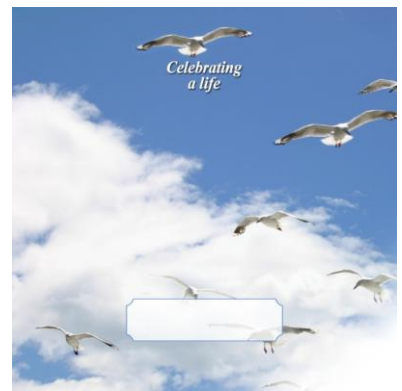
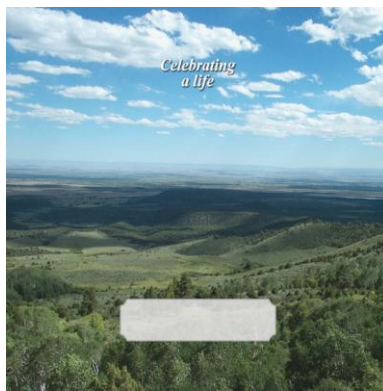
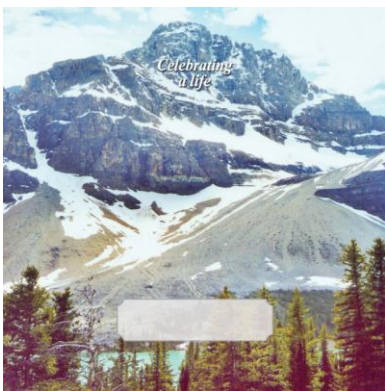
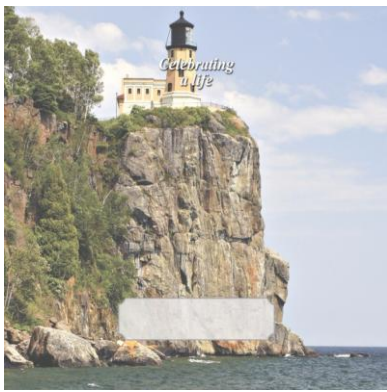
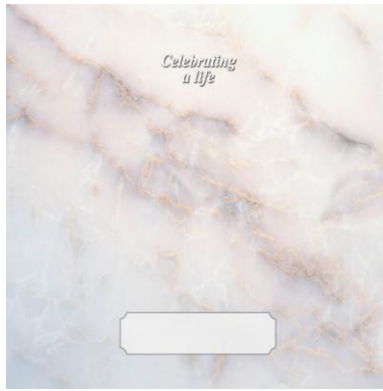
5. Journaling/Quote/Scripture: _____



Five Day Candles

Choose your layout





Inscription desired: _____

Email or send picture if desired to have on the candle. A layout can be emailed for approval.

Candle \$13.50 each + tax
Refill \$3.50 plus tax

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Candle order form

CONTACT AND PAYMENT INFORMATION:

First Name MI Last Name

Street Address

City State Zip

Type of candle and quantity: Life Journey _____(\$30.00) or 5 day _____(\$13.50) 5 day refill _____(\$3.50)

Porcelain _____ (\$125.00)

Total order amount \$ _____ Sales tax 7% _____ Grand total _____

PAYMENT TYPE:

Credit Card Check Cash

Visa MasterCard Discover Card Number _____

Expiration Date _____ 3 digit code _____

Name on Card

Card billing address if different:

Street address

City State Zip

Signature to charge card

CANDLE INFORMATION:

First Name MI Last Name Please email photo or bring to our office

Dates: Birth _____ Death _____