



“LET HIS LIGHT SHINE” CHRISTMAS LUMINARIES DONATION FORM

DONOR INFORMATION

First Name(s): _____

Last Name: _____

Address: _____

Phone: _____

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Select one:

In memory of: _____

or

In honor of: _____

Please enclose \$10/per luminary and send to:

Shoreland Lutheran High School
Christmas Luminaries
9026 12th Street
P.O. Box 295
Somers, WI 53171



Shoreland Lutheran High School

Compelled by the love of Christ to educate, equip, and encourage students for lives of Christian service.