



The Ultimate Dogsport for Family and Fun
www.u-fli.com

Memory Ring Certificate

Name:	
Team Affiliation:	
Address:	
City / State / Zip:	
Phone:	
E-mail:	
Donation amount:	\$

Instructions:

- **Make a donation in memory of that special person, or K-9 companion who made a difference in your life.**
 - **Using just a few words, describe how that special person, or K-9 companion has impacted your life.**
 - **Example: ~Loving, Generous & Kind~**
 - **Any amount you wish to donate will be accepted. Cash or check only.**
 - **Please make all checks payable to "St. Jude Children's Research Hospital" and turn in with your certificate to the tournament score table.**
 - **Thanks for helping make a difference in a special child's life!**
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UFLI MEMORY RING CERTIFICATE

IN LOVING MEMORY OF

REMEMBERED AS BEING

FONDLY REMEMBERED BY

