



**METROPOLITAN**  
United Methodist Church  
**ALTAR FLOWER ORDER FORM**

**Please sign your name on the Flower Chart and complete the following:**

**DATE FOR FLOWERS TO BE PLACED ON THE ALTAR** \_\_\_\_\_

(please check the sign up calendar in the Narthex to make sure the date is available, make sure to reserve your date by putting your name in the appropriate section!)

**FLOWERS PURCHASED BY**

Name \_\_\_\_\_ Phone \_\_\_\_\_

In honor of \_\_\_\_\_

**or**

In Memory of \_\_\_\_\_

**FLORAL FEE**

\$50 for two arrangements

**FLOWER REMOVAL INSTRUCTIONS** (please circle one)

I will take the flowers home with me after

**or**

I want to leave the flowers at the church



Please place your check in an Altar Guild envelope with this completed form.

You may give your envelopes to any Altar Guild member or place in the Altar Guild mailbox-located in the Chapel.

***Please contact the church office with any questions (410) 523-1366***