



# MATER DOLOROSA

## PASSIONIST RETREAT CENTER

### Honor & Memorial Opportunities

Honor your family, a birthday, anniversary, a special occasion, your friendship with Mater Dolorosa, or in memory of the loss of a loved one.

_____	\$500 per line	<b><u>Monastery Memorial Garden Pillars - 4<sup>th</sup> Pillar</u></b> (1 line - 30 characters per line which includes spacing and punctuation)
_____	\$1,500	<b><u>Chapel Seat Plaque</u></b> ❖ (2 lines/27 characters each line)
_____	\$2,500	<b><u>Chapel Portico – Chair</u></b>
_____	\$2,500	<b><u>Garden of the Seven Sorrows – Chair</u></b> ❖ _____ Chair at the Fourth Sorrow ❖ _____ Chair by the Fountain
_____	\$5,000	<b><u>Amphitheatre – Bench</u></b>
_____	\$5,000	<b><u>Chapel Portico – Bench</u></b>
_____	\$5,000	<b><u>Garden of the Seven Sorrows – Bench</u></b> ❖ _____ Bench by the Fountain
_____	\$5,000	<b><u>Retreat Center</u></b> ❖ Door of Retreatant’s Room
_____	\$10,000	<b><u>Moreton Bay Fig Tree - Bench</u></b>
_____	\$50,000	<b><u>Garden of the Seven Sorrows – Beautiful life-size mosaic of the Seven Sorrows of Mary (Inscribed Plaque)</u></b>  <b>Available:</b> ❖ _____ First Sorrow of Mary – Mary Hears Simeon’s Prophecy of Sorrow ❖ _____ Second Sorrow of Mary – The Holy Family Flees Into Egypt ❖ _____ Third Sorrow of Mary – Mary & Joseph Seek Their Lost Child ❖ _____ Seventh Sorrow of Mary – Mary Buries Her Son

- ❖ A minimum of eight weeks is required from the time the donation is received to installation of the plaque or inscription.



Stations of the Cross Renovation Project

\_\_\_\_\_ \$30,000 Station Sponsor  
\_\_\_\_\_ \$10,000 Station Maintenance Sponsor

Garden of Gethsemane Project

\_\_\_\_\_ \$65,000 Apostle Figure of Peter  
\_\_\_\_\_ \$65,000 Apostle Figure of James  
\_\_\_\_\_ \$65,000 Apostle Figure of John

**PLEDGE PAYMENTS MAY BE AVAILABLE  
PLEASE CONTACT THE MATER DOLOROSA DEVELOPMENT OFFICE**

Name(s) to be inscribed:

**Line 1:** \_\_\_\_\_

**Line 2:** \_\_\_\_\_

My Name: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_ My donation check in the amount of \$ \_\_\_\_\_ is enclosed.

\_\_\_\_ I authorize use of my credit card for payment in the amount of \$ \_\_\_\_\_.

Please circle: MC VISA

Account No.: \_ \_ \_ \_ - \_ \_ \_ - \_ \_ \_ - \_ \_ \_

Name (as it appears on card) \_\_\_\_\_

Expiration Date \_\_\_\_\_ VIN/Security Code \_\_\_\_\_

Billing Address: \_\_\_\_ Same as above Different address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature: \_\_\_\_\_

Mater Dolorosa Passionist Retreat Center  
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*Mater Dolorosa Passionist Retreat Center is a 501 (c)(3) nonprofit corporation,  
Tax ID #87-0758476*