

Paving the Way

Changing lives.



You're invited to be a part of a historic moment in Maury Regional Health's history by purchasing a custom engraved paver to be installed around the iconic fountain in the front of Maury Regional Medical Center.

Your paver can honor family, friends, employees, retirees, businesses, organizations and more. Your tribute not only celebrates those who matter to you — it supports the Maury Regional Health Care Foundation in its mission to improve access to health services throughout our community.

Order information

Please complete the chart below to note how many pavers you would like to order. There is no limit to the total number of pavers you may purchase. However, there is a limit on the number of pavers that can mention the same honoree. If your purchase exceeds this limit, you will be contacted by the Foundation Office.

If you would like to purchase additional pavers with the same inscription for your home garden or personal use, please select that option under the inscription section. Please note that all personal pavers must be picked up at the Foundation Office.

Paver size	Pavers available	Cost per paver	Quantity desired	Total cost
Small 8" x 4"	800	\$150		
Large 12" x 12"	230	\$300		
Totals				

Engraving information

Please use this section to finalize your paver order and submit your custom inscription. To ensure quality and legibility, there are character limits for each size. If you have any questions or would like to order additional pavers with unique inscriptions, please contact the Foundation at 931.380.4075.

Large Paver | \$300

12" x 12" • 5 lines • 20 characters per line

My inscription should read:

☐ **Check if this applies:** As noted in my total quantity, I am ordering an additional paver for personal use and would like to use this inscription.

Small Paver | \$150

8" x 4" • 3 lines • 13 characters per line

My inscription should read:

☐ **Check if this applies:** As noted in my total quantity, I am ordering an additional paver for personal use and would like to use this inscription.

The Maury Regional Health Care Foundation reserves the right to deny the purchase of a paver or to remove a paver if the person or entity whose name appears does not align with the organization's brand, values or mission. Likewise, any message or material deemed inappropriate will be denied.

Billing information

Personal details

Name _____
Street address _____
City _____
State _____ Zip _____
Phone _____
Email _____

Method of payment

☐ **Check enclosed** (made payable to the Maury Regional Health Care Foundation)

☐ **Credit card**

Card Number _____
Expiration Date ____ / ____ 3-digit Code _____
☐ Visa ☐ American Express
☐ MasterCard ☐ Discover

Order Online

