

DEDICATION PAVER ORDER FORM

Name: _____ Company: _____

Address: _____

Telephone Number: _____ Email Address: _____

\$250.00 LARGE GRAY BRICK PAVER WITH WHITE LETTERING
<input type="checkbox"/> OPTION #1 <ul style="list-style-type: none"> ▪ Your Corporate Logo ▪ Three lines of text ▪ Text: 12-15 total letters and spaces per line
<input type="checkbox"/> OPTION #2 <ul style="list-style-type: none"> ▪ Name and Class ▪ Six Lines Only ▪ Text: 12-15 letters and spaces per line <p style="text-align: center;">Example: Student Name Class of 2009</p>
<input type="checkbox"/> OPTION #3 <ul style="list-style-type: none"> ▪ Your Family Name with Individual Family Members Listed Below ▪ Six Lines Only ▪ Text: 12-15 letters and spaces per line <p style="text-align: center;">Example: The _____ Family (Names of Family Members)</p>
<input type="checkbox"/> OPTION #4 <ul style="list-style-type: none"> ▪ In Memory of _____ ▪ Six Lines Only ▪ Text: 12-15 total letters and spaces per line

\$100.00 SMALL RED BRICK PAVER WITH WHITE LETTERING
<input type="checkbox"/> OPTION #1 <ul style="list-style-type: none"> ▪ Name and Class ▪ Three Lines Only ▪ Text: 12-15 letters and spaces per line <p style="text-align: center;">Example: Student Name Class of 2009</p>
<input type="checkbox"/> OPTION #2 <ul style="list-style-type: none"> ▪ Your Family Name with Individual Family Members Listed Below ▪ Three Lines Only ▪ Text: 12-15 letters and spaces per line <p style="text-align: center;">Example: The _____ Family (Names of Family Members)</p>
<input type="checkbox"/> OPTION #3 <ul style="list-style-type: none"> ▪ In Memory of _____ ▪ Three Lines Only ▪ Text: 12-15 total letters and spaces per line
<input type="checkbox"/> OPTION #1 <ul style="list-style-type: none"> ▪ Your Corporate Name ▪ Three Lines Only ▪ Text: 12-15 total letters and spaces per line

PLEASE PRINT LEGIBLY

Name on credit card: _____	Signature: _____
Credit card #: _____	Exp. Date: _____

Office use only	
Total Paid: \$ _____	Paid by: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card # _____ (last 4 digits) Initials: _____ Date: _____