

MEMORIAL PLAZA BRICK DONATION ORDER FORM

VETERANS MEMORIAL CENTER, INC
 400 S SYKES CREEK PARKWAY
 MERRITT ISLAND, FL 32952-3547
 TEL: (321)453-1776 FAX (321)453-1152

DATE: _____

BRICK LOCATION _____ BRICK # _____

NAME: _____ TEL# _____
 ADDRESS: _____ CITY: _____ STATE _____ ZIP _____

4" X 8" BRICK \$100.00

(Please print information for brick. Limited to 12 letters per line, including spaces)

Sample:

I	N		M	E	M	O	R	Y		O	F
J	O	H	N		W		D	O	E		
U	S	N		R	E	T		W	W	I	I

8" x 8" Brick \$175.00

(Please print information for brick. Limited to 12 letters per line, including spaces)

MAKE CHECKS PAYABLE TO: **VMC MEMORIAL PLAZA**

Check # _____ Cash (AMT) _____ Received by _____

Please make copy of order and give to person donating a brick.

MEMORIAL PLAZA INDEX

