



LEGACY BRICK REQUEST

Donor information

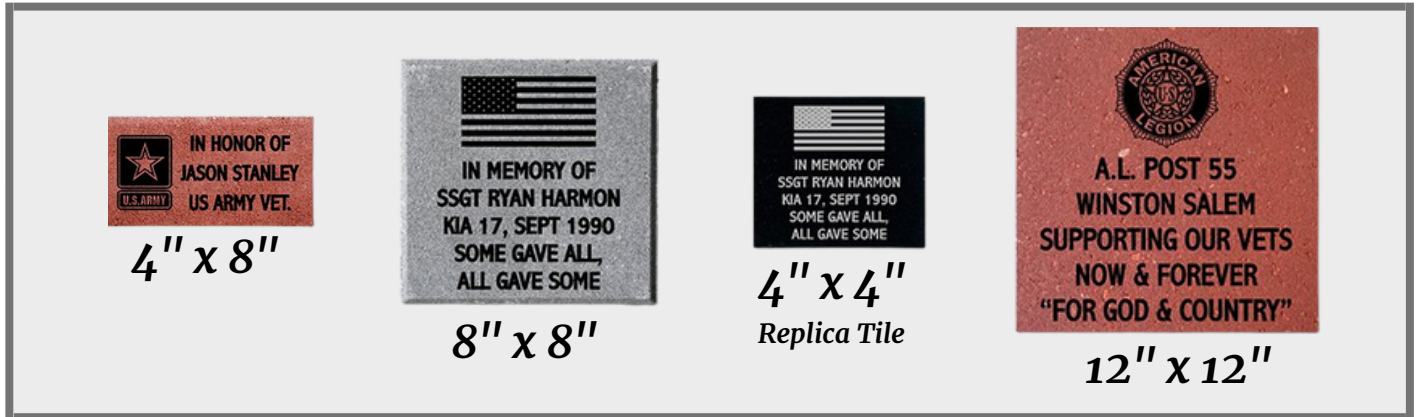
Name: _____

Address: _____

City: _____ State: _____ Zipcode: _____

Email Address: _____

Phone #: _____



• 4" x 8" Red or Gray Brick	Text Only or w/Clip Art	\$100
• 8" x 8" Red or Gray Brick	Text Only or w/Clip Art	\$200
• 12" x 12" Red or Gray Brick	Text Only or w/Clip Art	\$500
• 4" x 4" Replica Tile Keepsake	Same Text & Logo as Brick	\$ 25



For more clipart choices or to order online please visit:

www.polarengraving.com/VeteransMemorialParkofColumbusCounty

\$100.00

4" x 8" With Clipart Brick Information:

Clipart # _____	3 LINES (MAX 15 CHARACTERS PER LINE)



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\$100.00

4" x 8" Brick Information:

3 LINES (MAX 20 CHARACTERS PER LINE)

Replica Tile _____ Red Brick _____ or Gray Brick _____

\$200.00

8" x 8" With Clipart Brick Information:

Clipart #

5 LINES (MAX 20 CHARACTERS PER LINE)

Replica Tile _____ Red Brick _____ or Gray Brick _____



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\$200.00

8" x 8" Brick Information:

6 LINES (MAX 20 CHARACTERS PER LINE)

\$500.00

Replica Tile _____ Red Brick _____ or Gray Brick _____

12" x 12" With Clipart Brick Information:

7 LINES (MAX 20 CHARACTERS PER LINE)

Replica Tile _____ Red Brick _____ or Gray Brick _____



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\$500.00

12" x 12" Brick Information:

8 LINES (MAX 20 CHARACTERS PER LINE)

Replica Tile _____ Red Brick _____ or Gray Brick _____

Donation Amount\$_____

Please Make Checks Payable To:

Veterans Memorial Park (VMPCC)

PO Box 2046

Whiteville, NC 28472

Visit our website at:

www.veteransmemorialparkofamerica.com