

ORDER FORM: (Please complete and mail this form to):

Commemorative Brick Program
56 East Main Street
PO Box 718
Trumansburg, NY 14886-0718

Contact Information: Sue Henninger @ 607 387-4471, MSP Assistant or
Fran Maguire @ 607 387-6111, MSP Fundraising Chair.

Basic Brick Layout Form.

1st line (20): _____

2nd line (20): _____

3rd line (20): _____

_____ Option 1: No logo. Max 20 characters. Max 3 lines. \$35/each.

_____ Option 2: Center logo. Max characters/line. Max 2 lines. \$35/each.

_____ Option 3: Left logo. Max 14 characters/line. Max 3 lines. \$35/each.

_____ Option 4: Specialty logo. Choose center or left option. \$150/each.

_____ Option 5: Special site. Complete customer information and a MSP volunteer will call you to help design a site.

Your Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

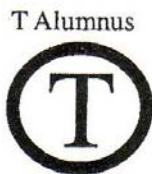
e-mail: _____

Option: _____ Price Each: _____ Total Amount: _____

Checks made payable to: Village of Trumansburg Bricks.

Sorry no credit card orders. **Thank you**

Circle logo choice:



Your Own Design