BRICK ORDER FORM

Southwestern Indiana Master Gardener Association, Inc. Master Gardener Display Garden "Memory Walk"



(Please complete a separate form for each brick purchased.)

Purchaser's Name		
Address		
City	State	Zip
Phone	Email	
8" x 4" Brick - \$100 (A portion of this payment is tax deductible to the extent allowed by law.)		
My check made payable to "SWIMGA" is enclosed for \$100		
Please charge \$100 to: VISA	Master Card	American Express
Card #	Expires	CVV Code
Name on Card		
Signature		
MY BRICK SHOULD BE INSCRIBED AS FOLLOWS: (20 characters per line. Please use one square per letter, space, or for punctuation. Due to machine engraving process (laser cut), all text will be capitalized and centered on the brick.)		
Please sign to verify that all information is correct:		
		Date

Mail completed brick form and payment to: SWIMGA Memory Walk

P.O. Box 173 Inglefield, IN 47618-0173