

StarLifter Park Memorial Brick Paver Order Form

Please Print All Information

Name:		
Address		
City	State	Zip Code
Telephone	E-Mail	
Military Unit <i>(Optional)</i>		

Make Checks Payable to: The Thomas B. McGuire Foundation

Mail to: The Thomas B. McGuire Foundation
 P.O. Box 1263
 Wrightstown, New Jersey.
 08562

For Office Use Only
<input type="checkbox"/> <input type="text"/>



*Preserve your name, or that of a loved one well into
 The next millennium, with a personalized brick paver.*

Ordering Information

1. When ordering more than one brick, **please attach a separate sheet of paper** for each additional honoree.
2. Each **4 by 8 inch** brick paver may be personalized with up to **3 lines per brick**.
3. Each line can have up to **13 characters, including spaces and punctuation**.
4. Cost for this type of inscription is **\$50.00**.

	1	2	3	4	5	6	7	8	9	10	11	12	13
Line #1													
Line #2													
Line #3													

ALL TEXT WILL BE IN CAPITAL LETTERS

Example

3 lines

4		X		8		B	R	I	C	K		
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Total number of Bricks : _____ x \$ _____ . _____ *Total Amount Enclosed*

For Additional information, please call: Ted Stremback: 609-987-8471 or Art Covello: 609-654-2236