StarLifter Park Memorial Brick Paver Order Form

Please Print 2	All In	form	ation	!											
Name:															
Address															
City	State									<u> </u>	Zip Code				
Telephone					E-Mail										
Military Uni	t <i>(Opti</i>	onal)													
Make Check	Make Checks Payable to: The Thomas B. McGuire Foundation														
Mail to: The Thomas B. McGuire Foundation P.O. Box 1263 Wrightstown, New Jersey. 08562 Preserve your name, or that of a loved one well into The next millennium, with a personalized brick paver.															
 Ordering Information When ordering more than one brick, please attach a separate sheet of paper for each additional honoree. Each 12 by 12 inch brick paver may be personalized with up to 6 lines per brick. Each line can have up to 15 characters, including spaces and punctuation. Cost for this type of inscription is \$100.00. 															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Line #1	<u> </u>														
Line #2	<u> </u>														
Line#3															
Line#4															
Line #5															
Line#6															
ALL TEX	XT V	VILI	BE	IN (CAP	ITA	LL	TT	ERS						
Example		, ILI		11 ()	C111	1111			LIKS						
6 lines	1	2		X		1	2		В	R	I	C	K		
Total number of Bricks : x \$ Total Amount Enclos													ıclos	ed	
For Addition	al info	rmatic	on, ple	ase ca	ll: Tec	Stren	npack	609-9	987-84	71 or A	art Co	vello: 6	609-654	1-2236	