



LETTERS MAILED

Date \_\_\_\_\_

# BRICK ORDER FORM

Donor's Name \_\_\_\_\_

Circle \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

**If your brick is to honor someone or is in memory of a loved one, please indicate below the name and address of the person to be notified. We will acknowledge all donations and notify the recipient of your gift.**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Donation requested for one lettered brick is \$50

One order form per brick

14 letters per line maximum (including blank spaces, periods, quotes and ampersands)

3 lines maximum

All letters must be capitalized

Lines will be centered automatically

**Print your inscription here, starting from the left.**


\_\_\_\_\_ I will be making my donation with the enclosed check for the following amount \$ \_\_\_\_\_

Please make checks payable to **Sarasota Garden Club, Inc.**

For more information please contact **David Richards**  
**Honor Brick Walk Chair**  
**365-2144**