

## BRICK ENGRAVING FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Cost: \$75.00

Paid: \_\_\_\_\_

Please fill out the form below exactly as you want it to appear on the brick. You can use up to 3 lines, with 14 characters or spaces on each line.

Example:

	J	O	H	N		S	M	I	T	H			
	M	A	B	E	L		S	M	I	T	H		
A	N	D		T	H	E		K	I	D	S		

Now for your inscription:


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Your copy:


Suggestion: Complete this form in pencil in the event corrections are required.

Please send your completed form and check made out to "The Garden Club of LBI" to

**Ms. Betty Frey, 416 N. 4<sup>th</sup> Street, Surf City, NJ 08008**  
**Tel: (609) 494-5791**