

BRICK ORDER FORM

PAVER SIZE

6" X 12" (\$100)

Name _____

Business _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

PAYMENT

Credit Card (circle) VISA MC DISC AMEX

Cardholder's Name _____

Card Number _____ Exp. Date ____/____

Signature _____

*Please make checks payable to Oswegoland
Park Foundation*

Your donation is tax deductible. Receipts will be mailed.

PAVER ENGRAVING

6" X 12" Paver 3 Lines 15 Characters each

Line 1 _____

Line 2 _____

Line 3 _____

*Mail with payment to P.O. Box 803,
Oswego, IL 60543.*