

YES, PLEASE ORDER A BRICK FOR ME TODAY!

Name (Mr./Mrs./Ms./rank) _____

Address _____

City _____ State _____ Zip _____

Phone (optional) _____

Brick size (please check one - to order more bricks, please photocopy this form):

<u>Individual</u>	
<input type="checkbox"/> 4" x 8"	<input type="checkbox"/> 8" x 8"
1-3 lines \$65	1-6 lines \$125

<u>Business/Organization</u>	
<input type="checkbox"/> 4" x 8"	<input type="checkbox"/> 8" x 8"
1-3 lines \$125	1-6 lines \$250

Line 1 Print in BLOCK LETTERS. There are 15 blocks per line including spaces and punctuation.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Line 2

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Line 3

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Line 4

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Line 5

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Line 6

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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NOTE:
The AMC Museum Foundation reserves the right to refuse inscriptions it considers inappropriate.

Method of Payment (please check one):

Check # _____

Money Order

VISA

MasterCard

Amount Enclosed: \$ _____

Card #: _____

Expiration Date: _____

Signature: _____

Mail your order form and payment to:

AMC Museum Foundation, Inc.

ATTN: Brick Fund

P.O. Box 02050, Dover AFB, DE 19902-5144

Donations are tax deductible in accordance with IRS regulations.