

Veterans Garden of Honor

Donor Name _____

Address _____

Telephone _____

Email _____

_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

(one letter per space, including spaces between words)

Please fill out the “brick” as you want your brick to be engraved.

Please enclose your donation of \$75.

Return the completed form to:

Allendale Charter Township, P O Box 539, Allendale MI 49401

Make checks payable to: Allendale Charter Township

