

National Garden Clubs, Inc.
ORDER FORM – GOLD STAR FAMILIES
MEMORIAL MARKER

Date: _____

ORDERED BY: _____

CONTACT NAME: _____ TELEPHONE: _____

ADDRESS: _____ E-MAIL: _____

CITY: _____ STATE: _____

ZIP CODE: _____

ADDRESS MARKER IS TO BE LOCATED: _____

SHIP TO: _____ CONTACT NAME: _____
(Business address receiving during normal business hours)

ADDRESS: _____ TELEPHONE: _____

DEDICATION DATE: _____

GOLD STAR FAMILIES MEMORIAL MARKER INSTRUCTIONS

1. Clearly type or print exact names(s) for the following.
2. Letters must be in upper and lower case conventions.
3. Use only 4 out of the 5 lines below.
43 spaces each line maximum **(to include spaces and punctuation between letters)**

SPONSORED BY

IN COOPERATION WITH

AND

ORDER APPROVED BY:

State Chairman: _____ Date: _____

State President: _____ Date: _____

NGC BS & GSF Chairman: _____ Date: _____

MAKE CHECK PAYABLE TO SEWAH STUDIOS- Garden Club will mail the original order form (completed), 3 copies of the order form & check made payable to Sewah Studios, to State BS & GSF Chairman, who will sign and mail the original order form, 2 copies of form & check to State President. State President will sign & mail the original order form, one copy of the form and check to NGC BS & GSF Chairman: Pamela L. Dowd, 1611 Georgetown Lane, Murfreesboro TN 37129-1742.. **Please type or print legibly.**