

National Garden Clubs, Inc.
ORDER FORM – BLUE STAR MARKERS

HIGHWAY MARKER _____

MEMORIAL MARKER _____

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: _____

HIGHWAY OR MEMORIAL MARKER INSTRUCTIONS

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

SPONSORED BY

IN COOPERATION WITH

AND

MAKE CHECK PAYABLE TO SEWAH STUDIOS. Send State Chairman four (4) copies of form with check; State Chairman will sign and mail check and order forms in triplicate the State President; State President will sign and mail copies and check to NGC Chairman. Please type or print legibly.

ORDER APPROVED BY:

State Chairman: _____ Date: _____

State President: _____ Date: _____

NGC Blue Star Chairman: _____ Date: _____