

National Garden Clubs, Inc.
ORDER FORM - BLUE STAR MEMORIAL MARKERS

MEMORIAL HIGHWAY MARKER _____

ORDERED BY: _____

CONTACT NAME: _____ TELEPHONE: _____

ADDRESS: _____ E-MAIL: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ADDRESS OF MARKER LOCATION: _____

SHIP TO: _____ CONTACT NAME: _____

(Business address receiving during normal business hours)

ADDRESS: _____ CITY: _____

STATE _____ ZIP CODE: _____

TELEPHONE: _____ DEDICATION DATE _____

HIGHWAY OR MEMORIAL MARKER Instructions

1. Clearly type or print exact name(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.

SPONSORED BY: _____

IN COOPERATION WITH : _____

ORDER APPROVED BY:

State Chairman: _____ - _____ Date: _____

State President: _____ Date: _____

National Chairman: _____ Date: _____

MAKE CHECK PAYABLE TO SEWAH STUDIOS.

Send State Chairman four copies of form with check. State Chairman will mail check and order forms in triplicate to NGC Chairman.

Please type or print legibly.

Betty Gourdin, GCSC Blue Star Memorial Chairman

153 Walnut Way

Pineville, SC 29468

10-22-14