

FUNDRAISING BRICK

Building A Strong
Foundation
Brick By Brick

Send completed forms or call
with questions:
Anglers at Webster Pond
2004 Valley Dr, Syracuse NY 13207
(P) 315-469-8027
cnortonvp@aol.com
www.websterpond.org
PLEASE CIRCLE YOUR BRICK CHOICE
BELOW

BUY A PERSONLIZED BRICK A FOREVER MEMORY AT WEBSSTER POND



HONOR A VETERAN

SPECIAL SECTION FOR PAST OR PRESENT
VETERANS
MUST INCLUDE RANK OR BRANCH

IN MEMORY OR DEDICATION
\$100.00 DONATION PER BRICK ENGRAVED
\$15.00 RUSH FEE MAY APPLY

BRICKS WILL BE PLACED UNDER THE
FLAGPOLE COMPLETE WITH LIGHTS

SHOW LOVE FOR FAMILY & FRIENDS



FOR LOVED ONES OR FRIENDS
IN MEMORY OR DEDICATION

\$100.00 PER BRICK ENGRAVED
\$15.00 RUSH FEE MAY APPLY
BRICKS WILL BE PLACED IN
PLANTER BOXES BY THE WATER

BRICKS ARE GUARANTEED FOR LIFE FREE OF CHARGE

*PLACE AND PAY FOR YOUR ORDER BY MAIL OR AT THE OFFICE
QUESTIONS CALL CHAD 727-2922*

ALL PROCEEDS BENEFIT WEBSTER POND

**PLEASE SAVE AND REOPEN DOCUMENT IN ADOBE TO USE THE
SUBMIT BUTTON OR SEND AS AN ATTACHMENT TO THE E-MAIL
BELOW**

BUY A BRICK PROGRAM

The Anglers Association of Onondaga at Webster Pond is raising money to help with maintenance, upkeep and new projects at the pond. In return, you get a personalized brick for a friend or a loved one, guaranteed for life and installed in planter boxes at the pond.

Cost: \$100.00 Per Brick, all orders must be paid in full before bricks will be ordered
Please engrave our brick as follows:

4 x8 Brick

ANY SYMBOL IS CONSIDERED ONE SPACE (PERIOD, COMMA, DASH)
ALL TEXT IS CENTERED UNLESS OTHERWISE NOTED. ALL BRICK
INSCRIPTIONS CAN BE A MAX OF 4 LINES 21 CHARECTERS EACH

4 x8 Brick

EXAMPLE

G	O		N	E	W	T	O	N		H	I	G	H		L	I	O	N	S	
S	T	A	T	E		C	H	A	M	P	I	O	N	S						
2	0	0	2	,		2	0	0	3	,		2	0	0	4					

**PLEASE RETURN THIS FORM WITH PAYMENT OF \$100.00 CASH CREDIT CARD ONLINE WWW.WEBSTERPOND.ORG
OR
CHECKS PAYABLE TO:
Anglers Association of Onondaga
2004 Valley Drive
Syracuse NY 13207
727-2922**

CUSTOMER INFORMATION

Name: _____ Phone: (_____) _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email Address: _____

OFFICE USE ONLY

Member Signature _____

Date: Inputed _____

Office code 1 5 7 D

Notes: _____