

Old Davie School Historical Museum

6650 Griffin Road, Davie, FL 33314
954-797-1044, fax 954-797-1047

SIGNATURE BRICK ORDER FORM

Your Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Pioneer Brick – 4" x 8"	3 lines - 14 characters per line	\$100.00
Heritage Brick – 8" x 8"	6 lines - 14 characters per line	\$150.00
Super Brick – 12" x 12"	9 lines - 21 characters per line	\$250.00

	Space #	14	21
Line 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Line 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mail certificate (if different than above) to:

Name: _____

Address: _____

City/State/Zip: _____

This is a gift from: _____

Please mail this form along with a check (made out to ODSHM) to the address above.
Thank you for your support!