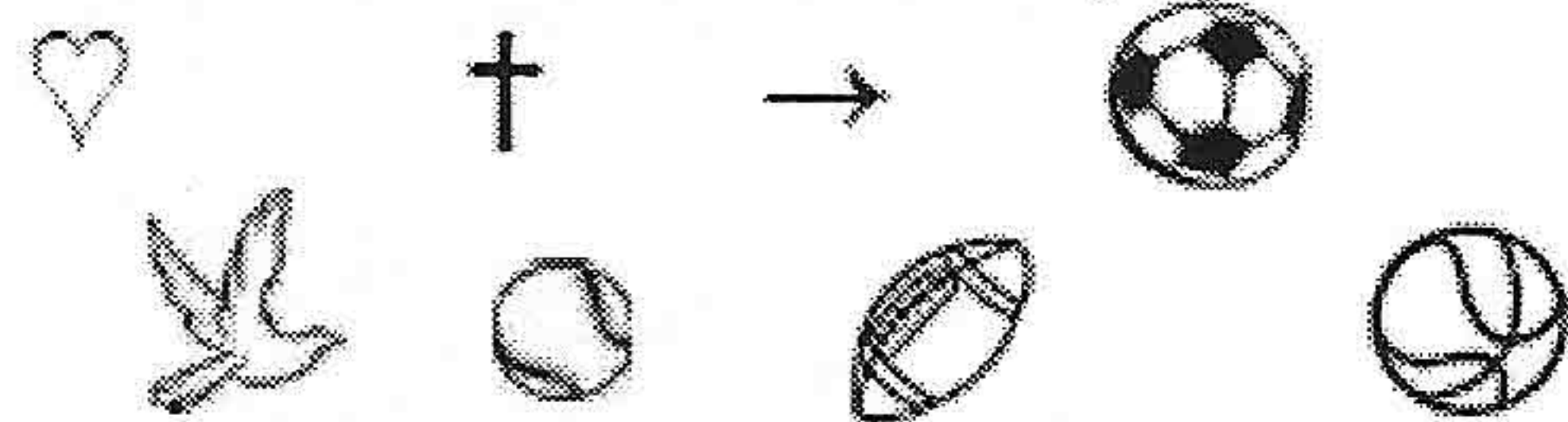


New Raider Stadium Wall of Honor BRICK ORDER FORM

Customer Name:														
Address:														
City, State, Zip:														
Phone:	()				-				x.		
Cell:	()				-						
PLEASE PRINT CLEARLY! Please use the space below for your engraving: (3 lines, 21 characters per line max-includes spaces) SPECIAL CHARACTERS: PLEASE CALL FOR ADDITIONAL CHARACTER OPTIONS - <u>MANY MORE AVAILABLE!</u>							Special Characters, Please indicate location in space/box below (Samples Below - Additional \$5 each): 							

The Athletic Director/Principal will have final approval over all content. No offensive phrases or comments will be permitted.

By signing below I approve the production of my brick with the above engraving and agree to payment terms..

Signature: _____ (Date) _____

Payment may be made in installments over 3 month period. Order WILL NOT be placed until payment in full is received. Deposits on any incomplete order over 3 months old will be forfeited.

Brick Only:	\$200.00
Character Add Ons:	_____
Replica Brick & Certificate:	<u>25.00</u>
TOTAL	\$ _____

Payment Method: Make checks payable to WLHS Brick Fund
Mail checks to: WLHS, 3692 Hwy 257, Dexter, GA 31019

Cash Check # _____ Amount Paid Today: _____

Person Taking Order: _____

Date Order Received: _____ Payment In Full: Y N

Date Rvd by Athletics: _____

Content Approved: _____

Date Brick Order Placed: _____