



WARRINGTON TOWNSHIP
 852 Easton Rd., Warrington, PA 18976
 Phone: (215)343-9350 * Fax: 215-343-5944

MEMORIAL BRICK APPLICATION

APPLICATION INSTRUCTIONS:

Please use the blocks below to indicate the wording on each brick (one form per brick). Print clearly and check the proper spelling of the name/wording. Each character needed is counted including spaces between letters, punctuations and symbols.

- 4" X 8" \$100 3 lines of text, 18 characters per line
- 6" X 12" \$150 4 liners of text, 18 characters per line
- 12" X 12" \$200 6 lines of text, 18 characters per line

APPLICANT INFORMATION:

Last Name:	First Name/Middle Name or Initial	Phone #:
Street Address:	City, State, Zip Code	Alternate Phone #:
		Email:

PAYMENT INFORMATION: Method of payment accepted: VISA, MasterCard, or checks made payable to Warrington Township.

For Office Use Only: Amount Paid/Date:	<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard
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