

National Garden Clubs, Inc.
ORDER FORM – BLUE STAR MARKERS

HIGHWAY MARKER _____ MEMORIAL MARKER _____

ORDERED BY: _____

CONTACT NAME: _____ TELEPHONE: _____

ADDRESS: _____ E-MAIL: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ADDRESS MARKER IS TO BE LOCATED: _____

SHIP TO: _____ CONTACT NAME: _____

(Business address receiving during normal business hours)

ADDRESS: _____ TELEPHONE: _____

_____ DEDICATION DATE: _____

HIGHWAY OR MEMORIAL MARKER INSTRUCTIONS

1. Clearly type or print exact names(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

AND

ORDER APPROVED BY:

State Chairman: _____ Date: _____

State President: _____ Date: _____

NGC Blue Star Chairman: _____ Date: _____

MAKE CHECK PAYABLE TO SEWAH STUDIOS. Send State Chairman 4 copies of form with check. State Chairman will mail check and order forms in triplicate to NGC Chairman. Please type or print legibly