



Paver Order Form

Card Number: _____
Expiration Date: _____
Signature: _____
Make checks payable to: AMA Alumni Foundation
Mail order form to: P.O. Box 100, Fort Defiance, VA 24437



Fill in the blanks below. PLEASE PRINT CLEARLY! Only one paver per order form, please. Print additional copies for additional pavers. When you buy a paver, you SUPPORT AMA'S ALUMNI FOUNDATION.

Your Name: _____ Class, if any: _____

Address: _____ City, Street, ZIP: _____

Phone: (____) _____ - _____ Email Address: _____

WHAT SIZE PAVER DO YOU WANT? ___ 8" X 8" - \$100 ___ 4" X 8" - \$50

Please PRINT below what you want on your engraved brick:

Maximum lettering: 4" x 8" - 3 lines of 12 characters each
 8" x 8" - 5 lines of 12 characters each

Line 1: _____

Line 2: _____

Line 3: _____

Line 4: _____

Line 5: _____

Punctuation marks and spaces count as characters!

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