

CITY OF COLUMBIA FIREFIGHTERS PARK MEMORIAL BRICK SPONSORSHIP FORM

\$100.00 – 4 X 8 BRICK

(15 Characters per line, 3 Lines)

*****Space and punctuation count as characters*****

Donor Name _____ **Phone#** _____

Company _____

Street Name _____

City _____ **State** _____ **Zip Code** _____

Email Address _____

MAX AMOUNT OF CHARACTERS PER LINE IS 15, INCLUDING SPACES

Line 1 - _____

Line 2 - _____

Line 3 - _____

***Forms are only accepted with payment or donation through Community Foundation**

Make checks payable to Firefighters Park Fund

Email form to hmiller@columbiatn.com with a copy of \$100.00 donation receipt from the Community Foundation attached or mail form with a check for \$100.00 to Columbia Fire & Rescue

1000 S Garden St, Columbia, TN 38401

For more information, call 931-560-1734

Signature _____

FOR STAFF USE ONLY

RECEIVED BY _____ **RECEIPT #** _____

NAME ON CHECK _____ **DATE** _____

Payment type: Check _____ **Cash** _____ **Donation to Foundation** _____

**DOCUMENT MUST BE SAVED IN
ORDER TO BE FILLED OUT**