

Contact Person: _____ Date of Birth: _____
Address: _____ City: _____
State: _____ Zip: _____ Phone: _____
Email: _____

_____ **Veteran Brick (4" x 8") No Charge**

Veteran's full name: _____
Years of service: _____
Military branch: _____

_____ **Corporate Brick (8" x 8") \$75**

Business name: _____

Message (up to 6 lines of copy):

Total amount enclosed: _____ (please make checks payable to Oakbrook Terrace Park District)

Please remit this form to:
Oakbrook Terrace Park District
15325 Ardmore Ave.
Oakbrook Terrace, IL 60181



Payment information:

Cash Credit Card #: _____ Exp. Date: ____ / ____
 Check # _____ Signature authorizing payment: _____