

# Brick Order Form

**Engraved bricks are at the garden of the new HFM building**

Please reserve the following brick(s) for me. The inscription for my brick(s) is indicated on the bottom of this form.

Quantity	Size	Amount	Total
	4" x 8" Paver	\$100	
	8" x 8" Paver	\$500	
<b>Total Amount Due</b>			

- Enclosed is a check made out to HFM  
 Please bill my:    Visa    Mastercard    American Express

Name on Card: \_\_\_\_\_

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

**\$100**                      **4" x 8"**


Please put the inscription at left on my brick.

If additional bricks are purchased, please provide additional inscriptions on separate sheet of paper.

**\$500**                      **8" x 8"**


Please return this form to:

Hemophilia Foundation of Michigan  
 1921 W. Michigan Avenue  
 Ypsilanti, MI 48197