



# WREATHS *across* AMERICA

## WREATH SPONSORSHIP FORM

\*Sponsored wreaths are placed on the grave markers at state, national veterans cemeteries as well as local cemeteries each December. Wreaths may be purchased online at [www.WreathsAcrossAmerica.org](http://www.WreathsAcrossAmerica.org)

If you wish to make your sponsorship with a credit card please visit our website for a secure online transaction.

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

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

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

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

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

Email: \_\_\_\_\_

Do we have permission to publicize your name as a sponsor?

Yes OR  No, I wish to remain Anonymous

**PLEASE MAKE CHECKS PAYABLE TO:**

**WREATHS *across* AMERICA™**

PO Box 249

Columbia Falls, ME 04623

Questions? Please call 877-385-9504

THANK YOU FOR YOUR SPONSORSHIP AND JOINING US  
IN OUR MISSION TO REMEMBER, HONOR AND TEACH!

Sponsorship	Price	Quantity	Total
Individual = 1 Wreath	\$15.00		
Mailed "In Honor" card = If you wish to send a mailed honor card telling someone of your sponsorship-see "In Honor" section below. *Card will not be mailed if the \$2 fee is not included.	\$2.00		
Family = 4 Wreaths	\$60.00		
Small Business = 10 Wreaths	\$150		
Corporate = 100 Wreaths	\$1,500.00		
		<b>Grand Total</b>	

**\*\*SORRY, WE CANNOT TAKE GRAVE SPECIFIC REQUESTS\*\***

### IN HONOR OF:

Please provide email of "In Honor Of" recipient, or mailing address so a card can be sent notifying them of your sponsorship in their honor. (If you have a specific message please write it on the back of this sheet and we will include it.)

Email: \_\_\_\_\_

Mailing: \_\_\_\_\_

### IN MEMORY OF:

This name will be listed on our online memory wall, please provide name, rank, branch of service and state resided.

Branch of Service: \_\_\_\_\_

Rank: \_\_\_\_\_

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

Please note that ALL sponsorships are sent directly to the location and NO wreaths are sent to the individuals purchasing sponsorships.

Location ID: MIGLNH

Fundraising Group ID: M10128P

### FOR OFFICE USE ONLY

Cash \$: \_\_\_\_\_

Total \$: \_\_\_\_\_ Date: \_\_\_\_\_

Total # of Checks: \_\_\_\_\_

Reconciled: \_\_\_\_\_

MO \$: \_\_\_\_\_

GEN: \_\_\_\_\_

Entered \_\_\_\_\_