



# WREATHS *across* AMERICA

## Wreath Sponsorship Form

**FOR EVERY 3.4 WREATHS SPONSORED CONCORD CEMETERY WILL  
RECEIVE (1) FREE WREATH**

Sponsored wreaths are placed on grave markers at state and national veterans' cemeteries, as well as at local, community cemeteries each December. Wreaths may also be sponsored online at [www.WreathsAcrossAmerica.org/OH0164](http://www.WreathsAcrossAmerica.org/OH0164). 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: \_\_\_\_\_

Please make checks payable to:

**Wreaths Across America**  
PO Box 249  
Columbia Falls, ME 04623

Call 877-385-9504 with any questions.  
*Thank you for your sponsorship and joining us in our  
mission to Remember, Honor and Teach!*

Sponsorship Type	Price	Quantity	Total
1 Individual Wreath	\$17.00		
2 Wreaths	\$34.00		
4 Wreaths	\$68.00		
5 Wreaths	\$85.00		
10 Wreaths	\$170.00		
100 Wreaths Corporate	\$1,700.00		
Custom number of wreaths			
<b>Mailed "In Honor" card</b> = If you wish to send a physical honor card telling someone of your sponsorship, please see "In Honor" section below. The \$2 fee is required for this mailing.	\$2.00	<b>Grand Total</b>	

**\*\*AT THIS TIME CONCORD TOWNSHIP DOES NOT ACCEPT GRAVE SPECIFIC REQUESTS\*\***

### In Honor of:

Below, please provide email or mailing address of "In Honor of" recipient so we can notify them of your sponsorship in their honor. If you have a specific message please write it on the back of this sheet.

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

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

### In Memory of:

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

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

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

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

Please note, **ALL** sponsored wreaths are shipped directly to the location and **NO** wreaths are sent to the individuals purchasing sponsorships.

**FUNDRAISING GROUP ID: OH0164 / LOCATION ID: OHCTCC**

### FOR OFFICE USE ONLY:

Cash: \_\_\_\_\_ Total: \_\_\_\_\_ Date Received: \_\_\_\_\_

Total No. Checks: \_\_\_\_\_ Reconciled: \_\_\_\_\_

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

Entered: \_\_\_\_\_

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