

**COMMEMORATIVE BRICK DONATION FORM**

**FOR HC's ALL-INCLUSIVE PLAYGROUND**

**Please complete this form and mail with your check payable to:**

**Harvesting Capabilities, Inc.**

**(Note "Playground" on memo)**

**Mail to: Tina Carter, Branch Manager—Beacon Credit Union**

**820 North Broadway Peru, IN 46970**

**Purchaser's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

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

**Inscription: Please print the message you want on your brick. No more than 15 characters, punctuation marks and spaces per line; all letters are capital letters; inscription will be centered on brick. 3 lines maximum.**

Line 1															
Line 2															
Line 3															

**Harvesting Capabilities, Inc., is NOT responsible for errors made by the donor on this order form;  
we reserve the right to refuse any wording deemed inappropriate.**

**Harvesting Capabilities, Inc.**

**231 North Grant — Peru, IN 46970**

**Phone: (765) 472-1902**