

**DEADLINE:**  
**November 27, 2019**  
**CODE: NJ0146P**



**Rotary**  
 Club of Asbury Park



**Wreath Sponsorship Form**

Sponsored wreaths are placed on grave markers at state and national veterans' cemeteries, as well as at local, community cemeteries each December. Wreaths can be sponsored online at

[www.WreathsAcrossAmerica.org/NJ0146P](http://www.WreathsAcrossAmerica.org/NJ0146P)

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
<b>Individual</b> = 1 Wreath	\$15.00		
<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>Family</b> = 4 Wreaths	\$60.00		
<b>Small Business</b> = 10 Wreaths	\$150.00		
<b>Corporate</b> = 100 Wreaths	\$1,500.00		
		<b>Grand Total</b>	

**\*GRAVE SPECIFIC REQUESTS ARE NOT ACCEPTED ON THIS FORM\***

**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 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 buyer.*

Location ID:       NJMCVY       Fundraising Group ID:       NJ0146P      

**FOR OFFICE USE ONLY:**

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

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

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

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

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