



NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____
 EMAIL _____

Please fill out this form indicating the item you want with an X, the quantity, the extended cost, and the total cost. Mail the form with your check (please make out to Bookworm Gardens) or money order to : **Bookworm Gardens
 PO Box 883
 Sheboygan, WI 53803**

Item	Quantity	Cost	Extended Cost
*If you would like the recipient to decide on the engraving, please leave these lines blank.			
<input type="checkbox"/> A. 4" x 8" Brick Paver – \$250 (Holds 3 lines with 20 characters per line)	_____	_____	_____
Line 1 _____			
Line 2 _____			
Line 3 _____			
<input type="checkbox"/> B. 8" x 8" Brick Paver – \$500 (Holds 3 lines with 20 characters per line)	_____	_____	_____
Line 1 _____			
Line 2 _____			
Line 3 _____			
<input type="checkbox"/> C. Metal Bench – \$1,500	_____	_____	_____
<input type="checkbox"/> D. Trash Container – \$1,000	_____	_____	_____
<input type="checkbox"/> E. Dragonfly Bench – \$1,700	_____	_____	_____
<input type="checkbox"/> F. "Happy" Chair – \$800	_____	_____	_____
<input type="checkbox"/> G. Planting Seeds Sculpture – \$7,000	_____	_____	_____
<input type="checkbox"/> H. Sphere Fountain – \$10,000	_____	_____	_____
Items C to F: Recognition plaques to read:			
Line 1 _____			
<input type="checkbox"/> I. A Bookworm Gardens Donation – Your 'Perfect Gift' can be any amount.			Total _____

PAYMENT OPTIONS Payment in Full – Total \$ _____
 3 year pledge with first installment enclosed – \$ _____ Month to send pledge reminder _____