



www.CPDmemorial.org



Gold Star Families Memorial and Park MEMORIAL BRICK PROGRAM

The finest law enforcement memorial in the nation is now a reality. Gold Star Families Memorial & Park lies softly in the shadow of our city, nestled between Soldier field and our lakeshore.

Now is your chance to honor the memory of a lost friend, family, or loved one (**the “In Memory of” style brick does not have to have been a police officer**) or honor the career of an active or retired Officer, or list the donor, or donor’s names. Don’t miss this chance to be a part of Chicago history by having your personalized, engraved brick set in Gold Star Families Memorial and Park for all to see.

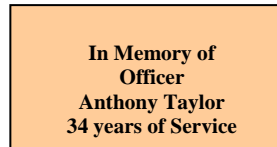
There are 3 possible brick configurations as shown below and due to strict guidelines please follow the template to the right. Your inscription will be center adjusted. The Chicago Police Memorial Foundation reserves the right to alter names and messages for appropriateness and to comply with the Chicago Park District’s engraving guidelines.

Yes, I would like to purchase ___ 4”x 8” brick(s) total @ \$100.00 each.

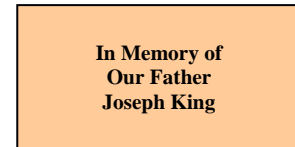
Brick style #1. 4” x 8” brick(s) (Memory)

				I	n		M	e	m	o	r	y		o	f				

#1



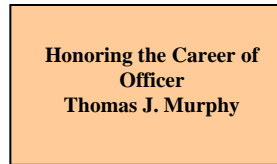
OR



Brick style #2. 4” x 8” brick(s) (Honoring)

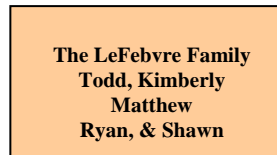
H	o	n	o	r	i	n	g		T	h	e		C	a	r	e	e	r		o	f	

#2

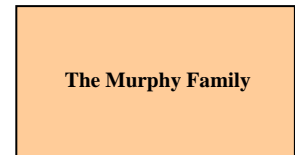


Brick style #3. 4” x 8” brick(s)

#3



OR



If purchasing more than one brick that you would like to see placed together you must submit them together with payment. The Chicago Police Memorial Foundation cannot guarantee that your bricks will be placed together but will make attempts to do so.

Enclosed is a check or money order in the full amount.

Due By: March 1, 2010

Bill my credit card the following amount: MC Visa Discover AMEX Total Cost: \$ _____

Credit Card Security Code (The CSC is a 3 or 4 digit code on the back of your credit card): _____

Account number: _____ Expiration Date: _____ Signature: _____

Full Name: _____ **Address:** _____ **City:** _____

State: _____ Zip: _____ Home Phone: (____) _____ Work phone: (____) _____

E-Mail: _____ (Please include e-mail for future Foundation updates)

Send completed forms with payment to: **Chicago Police Memorial Foundation**

1407 W. Washington Blvd. Chicago, IL 60607 (312) 499-8899