

Anniversary Parishioner Journal Boosters Order Form

Check all that apply. Please print clearly and neatly.

Deadline is Monday, September 25th.

Make checks payable to: St. Margaret of Scotland

All Ad content and photo/artwork must be reviewed by 75th Committee for approval.

Please submit completed order form with content and/or photo to the Parish Center or email: knorris@saintmargaret.com

{	}	Parish Family Formatted Listing			\$	25.00
		Example: The Wilson Family circa 1	965			
		The [insert last name] Family circa [insert registration year]				
{	}	In Memory Formatted Listing Example: Mr./Mrs. or Mr. & Mrs. Smith or John Smith			\$	25.00
		[Mr. or Mrs. or First Name]	[insert las	st name]	_	
		Display Boosters				
{	}	Full Page	\$ 250.00			
{	}	Half Page \$ 175.00		75.00		
{	}	Quarter Page \$120.00				
Na	ıme:					
Αc	ldress:					
Co	ontact t	ele #:				
		Office use only				
Total Amount Due: by v					m	
			Amount	Check	#	