

RIVERVIEW VETERANS MEMORIAL MEMORIAL BRICK APPLICATION

Name of Donor: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone No.: (_____) _____

Name as it is to appear on brick paver:

Line #1

Line #2

Line #3

The cost per brick paver is \$100.00.
Make checks payable to: City of Riverview
Mail to:
City of Riverview
Recreation Department
14100 Civic Park Dr., Riverview, MI 48193