



THORNDALE VOLUNTEER FIRE COMPANY, INC.

COMMITTED TO SERVING OUR COMMUNITY

REFLECTIVE ADDRESS SIGN ORDER FORM

PLEASE FILL OUT THE FOLLOWING DETAILS AND MAIL (WITH PAYMENT):

THORNDALE VOLUNTEER FIRE COMPANY
ATTN: REFLECTIVE ADDRESS SIGN PROGRAM
PO BOX 72525
THORNDALE, PA 19372

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ - _____ - _____

EMAIL ADDRESS: _____

HOUSE NUMBER ON SIGN

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*IF YOUR ADDRESS HAS FEWER THAN 4 DIGITS, CROSS OUT REMAINING ONES.

SIGN ORIENTATION

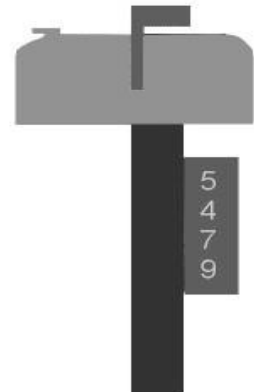
HORIZONTAL: _____

VERTICAL: _____

HORIZONTAL

V
E
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C
A
L

**ONLY
\$15**



INTERNAL USE ONLY

CASH: _____

CHECK: _____

CHECK NUMBER: _____