

ADDRESS LOCATOR SIGN ORDER FORM:

Name _____

Address _____

Daytime Phone Number _____

IMPORTANT!

PLEASE INDICATE SIGN DIRECTION:

____ Vertical



____ Horizontal



SIGN FEE: \$20.00

Please make check or money order out to:

Xenia Township Firefighters Community Association

Please mail to:

Xenia Township Firefighter Community Association

8 Brush Row Road

Xenia, OH 45385

