

Contact at Location Approval Form

This form needs to be filled out by the contact person at the cemetery/memorial/miscellaneous location in order to be approved as a location. (Please submit this form by emailing it to julie@wreathscrossamerica.org, by faxing it to 1-866-956-1625, or by mailing it to PO Box 249 Columbia Falls, ME 04623.)

Name of Location: _____

Name of Contact at Location: _____

Contact at Location's Physical and Mailing Address:

Contact at Location's Information: (both are required for office purposes only)

Phone Number: _____

Email Address: _____

Would you like to be copied on delivery information or special announcements from Wreaths Across America by email. _____ Yes _____ No

Are there any special rules for your location that Wreaths Across America needs to comply with?

Questions or Comments:

By signing this form you are agreeing to participate in the Wreaths Across America program by allowing us to hold a ceremony and place wreaths at your location.

Signature of Contact at Location

Date Signed