



TRIBUTE FORM

SCHOOL NAME: GEORGETOWN HIGH SCHOOL SPORT: BASKETBALL

Student Name: _____

Tribute Message: _____

Name on card: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

Email address: _____



Credit card #: _____ *

**If preferred, please call with credit card information: 503-214-4424 ext. 291*

Expiration date: _____ CVS#: _____

Please circle size below (also choose design options A, B or C at the bottom of form):

LARGE: \$125 MEDIUM: \$75 SMALL: \$50

Please charge my card in the amount of: \$ _____

Signature: _____

Scan form and email to:
tributes.gamedaymedia@gmail.com

DUE DATE: FRIDAY, December 7th, 2018

Due to production deadlines we cannot accept past due tributes

Questions: Please call 503-214-4424



LARGE
5.5 X 8.5

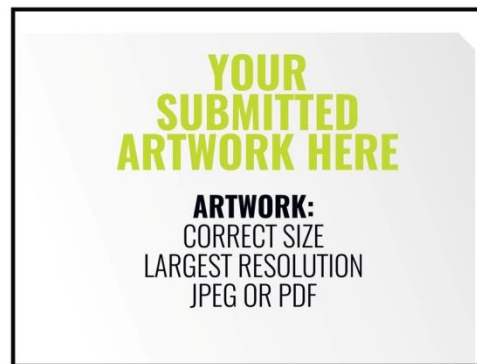


MEDIUM
5.5 X 4.25



SMALL
5.5 X 2

Option A Examples



MEDIUM TRIBUTE OPTIONS (TRIBUTE DESIGNS VARY SLIGHTLY AMONG SIZES)

DISCLAIMER: UNLESS OTHERWISE SPECIFIED, OPTION A WILL BE SELECTED.

OPTION A

OPTION B

OPTION C

Please select a tribute option above. Scan and email form along with 1-3 photos to tributes.gamedaymedia@gmail.com