

Contact at Location Approval Form

This form needs to be filled out by the contact person associated with the cemetery/ memorial/ miscellaneous location in order to be approved as a location. This can be a town official if your cemetery is not manned on a daily basis. (Please submit this form by emailing it to locations@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 (must work at cemetery/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:

Signature of Contact at Location

Date Signed

Thank you for allowing us to participate at your location and for providing your contact information.