

Wedding Label Request Form

Request	ted by	Gaam		Date
Busines	s			
Address	<u> </u>	City_		State/Zip
Home PhoneCell		Cell	Business Phone	
Life Mei	mberAnnualMe	mberNo	nMember	Sponsor
Purpose	e for which labels request	ed		
Occasio	n Date	Date v	vhen labels neede	ed
This is ho payment	owever subject to approval f of \$ 200 per set of labels.	rom LPS committee. For	additional set the	ing occasion of his son or daughter labels shall be delivered upon
	Nembers shall pay \$200 per Payment: Credit Card No			Chack
	els are issued as per the follo			
•	 The labels shall be used for the purpose for which they are requested. Labels cannot be given to any other individual without the written permission of LPS Committee. 			
Signature	e	Date	-	
	Mail your request to :	Fax:		
	LPS of USA 9005 Overlook Blvd Brentwood, TN 37027		(866) 201-5813 Phone: (866) 201-2354	

Email: info@lpsofusa.com Website: www.lpsofusa.com