



# Maclean Animal Adoption Center Naming Rights Proof Form

**PLEASE RETURN THIS FORM: Maclean Animal Adoption Center  
PO Box 3426  
Great Falls, MT 59403**

If you feel that 60 characters is not enough space to put your designation please call us at the office and we will try to come up with a solution, 727-7387.

3 lines / 20 characters per line


I have reviewed my inscription above and I certify that it is exactly as I wish it to appear on the naming designation signage in the Center.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Please Print) (Please include in case we have further questions)

Email: \_\_\_\_\_  
(Please Print clearly)

\_\_\_\_\_  
Sign Date