



Full payment must accompany this application for it to be accepted and processed.

TO BE COMPLETED BY DONOR/APPLICANT

Donor Name:

Donor Mailing Address *(number and street or PO Box, city, state, zip):*

Donor Phone Number:

Donor Email Address:

Honoree Name(s) *(person/s to be named on the bench/plaque):*

Preferred Park *(check one):*

- Veterans Memorial Park
- Wilgrove Park

Preferred Location in Park *(briefly describe):*

Memorial Type *(check one):*

- Park Bench
- Tree *(choose tree type in next box)*

Tree Species *(for memorial trees only):*

- Thundercloud Ornamental Plum
- Sunset Red Maple
- Natchez Crepe Myrtle

I have read, understood, and agree to the Town's policy for this program.

Applicant's Signature

Date

TO BE COMPLETED BY TOWN STAFF

Application Received By:

Date Received:

Application Checklist:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Complete & Legible Application Form | <input type="checkbox"/> Full Payment | <input type="checkbox"/> Complete & Correct Wording Form | |
| <input type="checkbox"/> Site Reviewed w/ Applicant & Approved by Staff | <input type="checkbox"/> Wording Approved by Staff | <input type="checkbox"/> Materials Ordered Date: _____ | <input type="checkbox"/> Installed Date: _____ |

All words will be centered on the plaque unless otherwise specified by the donor.

The honoree's name(s) must be included in the wording.

Each of the six lines may have a maximum of 20 characters each, including spaces. Indicate a space by leaving the box empty.

Characters may include the following:

- upper- and lowercase letters
- comma ,
- hyphen -
- quote marks “ ”
- ampersand &
- apostrophe ‘ ’

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Please print clearly. Town staff reserves final wording approval.