TREE DEDICATION ORDER FORM

The next Tree Dedication Ceremony will be held in fall Deadline to purchase a tree for inclusion in the next Ceremony is July 1, 2025

I would like to purchase a tree to be plant Betty Russell Park Cedar Park Chittenden Park Christine Thompson Park Concord Oaks Park Esper Petersen Park	anted in (please che Hunt Club Park Kings Park O'Plaine Park Prairie Oaks Par Providence Par Ravinia Park Shaw Park	South Ro Southridg Timberwa k University	ge Park oods Park / Park ark West ark I Park	
This giff is:	☐ In mem	ory of		
Name of Recipient		Date of purchase		
Donated I	oy: (What should th	e tree marker say?)		
Contact name		Day & Evening Phones		
Address				
City/State/Zip		Email Address		
<u>Shade</u> <u>Sha</u>	etermined by the G ade vlocust Rive Jap		Evergreen Eastern White Pine Norway Spruce Douglas Fir Dawn Redwood (deciduous) TBD	
☐ Tree (includes tree marker) \$4	50 🗆 wo	all Plaque(Optional-fo	or the home) \$85	
You may charge your payment by completing Gurnee Park District and mail to: Gurnee Park I information, please call Sarah at (847)599-3781. (847)623-8121. A confirmation letter will be sent	District, 4374 Old Gro If you are charging	nd Avenue, Gurnee, II	L 60031. For more	
Total Amount Paid: Method of Payment: Cash Credit Card Check #	Credit Cards A Cardholder No Card Number	ame	MasterCard Discover	

Authorized Signature_

PARK BENCH DEDICATION ORDER FORM

The next Dedication Ceremony will be held in the fall Deadline to purchase a bench for inclusion in the next Ceremony is July 1, 2025

I would like to purchase a bench to be placed at (please check below):

Cedar Park Chittenden Park Christine Thompson Park Churchill Hunt Park Concord Oaks Park Esper Petersen Park Hunt Club Park	Cings Park D'Plaine Park Prairie Oaks Park Providence Park Ravinia Park haw Park outh Road Park		Southridge Park Timberwoods Park University Park Viking Park Viking Park West Village Park Vineyard Park Westgate Park		
Name of Recipient Donated by: (What should the bench market)	er say?)	Date of pu	rchase		
Contact name		Day Phone			
Address City/State/Zip		Evening Phone Email Address			
Bench \$2000					
Total Amount Paid: Method of Payment: Cash Credit Card Check # Cash, checks and credit card transactions are processed as they are received	Card Numbe	Name r: - te	VISA MasterCard Discover Amt of Charge \$		