



COMMEMORATIVE BENCH & TREE PROGRAM APPLICATION

DONOR INFORMATION

Donor Name:			
Email Address:			
Phone, Mobile:		Other:	
Mailing Address:			
City:			
State:		Zip:	

HONOREE INFORMATION

Person or Event:			
Preferred Location:			
Selection:	<input type="checkbox"/> Bench, \$1,300 <input type="checkbox"/> Tree, \$500		
Type of Tree:			
Plaque Text:	<i>Wording for plaque (four-line limit; up to 30 characters per line for trees, 56 characters per line for benches)</i>		
Signature:			
Date:			

Send this completed form and a check or money order payable to Fairfield County Park District to the address below.

Donations usually qualify as charitable contributions. See IRS Publication 526 Charitable contributions. Check with your tax advisor or CPA for up-to-date information.

Form Revised 12/12/2023



For Office Use Only

Info Taken By:	
Amount Received:	
Payment Method:	<input type="checkbox"/> Cash <input type="checkbox"/> Check, Check No:
Tree Selection:	<input type="checkbox"/> Approved by
Park Location:	<input type="checkbox"/> Approved by

