



Parks and Recreation Department
Memorial Tree, Kiosk and Bench Donation
Application Form

Date _____

Applicant

Name _____ Phone _____

Address _____

Type of Memorial

- | | | | |
|--|---------|--|---------|
| <input type="checkbox"/> Memorial Bench | \$3,200 | <input type="checkbox"/> Memorial Tree (24" box) | \$1,000 |
| <input type="checkbox"/> Replacement Bench | \$2,000 | <input type="checkbox"/> Replacement Tree | \$220 |
| <input type="checkbox"/> Memorial Kiosk | \$3,500 | <input type="checkbox"/> Replacement Plaque | \$126 |
| <input type="checkbox"/> Replacement Kiosk | \$2,200 | | |

Memorial Plaque - see page 2

(Not available on a memorial tree)

Placement of Memorial

Park and/or area of park _____

Approved by City (✓):

1st Choice _____

2nd Choice _____

This section to be filled out by City staff.

Bench/Kiosk Model _____ Bench/Kiosk Cost _____

Plaque Model _____ Plaque Cost _____

Type of Tree _____ Tree Cost _____

Date Installed _____ Installation Cost _____

Deposit Date _____ Total Costs _____

Amount remaining for maintenance _____

Account: 56-2516

303 W. Commonwealth Ave., Fullerton, CA 92832 Phone: (714) 738-6575 Fax: (714) 738-6599



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Memorial Plaque - choose one

(Not available on a memorial tree)

- Dedicated to _____ Date _____
- Donated by _____ Date _____
- In Memory of _____ Date _____
- In Loving Memory of _____ Date _____
- Dedicated to the Memory of _____ Date _____
- Given in Loving Memory of _____ Date _____
- In Celebration of _____ Date _____
- In Honor of _____ Date _____
- In Honor and Memory of _____ Date _____
- In Tribute to _____ Date _____
- In Appreciation of _____ Date _____
- In Grateful Apprciation of/to _____ Date _____

In addition, the following 2 options may be applied to the standard wording selection:

- 1) Birth and death dates, full dates or just years.
- 2) Inclusion of Title and/or Rank and/or U.S.Military Organization affiliation to the name.
