

PARKS MEMORIAL DONATION PROGRAM ORDER FORM



Donor(s) Name or Organization:			
Address:		City, State, Zip:	
Phone #:			
Email:			

PRE-APPROVED MEMORIAL OR DONATION ITEMS: *(Please check appropriate box or boxes)*

<input type="checkbox"/>	Memorial Tree \$700	<input type="checkbox"/>	Engraved Playground Paver Stone \$250
<input type="checkbox"/>	6' Metal Bench with Brass Plaque \$5,000		
<input type="checkbox"/>	Sidewalk Engraving @ Elena's Children's Park		

Proposed Park Location:

Desired Inscription/Engraving – *(Applies to brass leaf for trees, plaques for benches and drinking fountains and playground stones)*

Please complete this section for

Elena's Children's Park sidewalk engraving:

In Memory of

(Child's Name):

Description of child's affiliation with University Park (i.e. resident, grandchild of a resident, attended school/church here, etc.):

I certify that I am the parent or legal guardian of the above-mentioned child, and do hereby grant permission to the City of University Park to engrave the above listed name in the sidewalk at Elena's Children's Park.

Parent's Name:

Parent's Phone #:

Parent's Address:

Signature:

STATE OF TEXAS / COUNTY OF DALLAS

Before me the undersigned authority on this day personally appeared _____, known to be the person whose name is subscribed to the foregoing instrument, and acknowledge to me he/she executed the same for the purpose and consideration therein expressed and, in the capacity, herein stated. Given under my hand and the seal of office on the _____ day of _____, 20_____.

Signed: