



The Village of  
**ORANGEVILLE**

## Park Donation & Memorial Program Form

Donor name or organization: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail \_\_\_\_\_

Pre-approved donation list of new items: (please check appropriate boxes)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Tree               | <input type="checkbox"/> Picnic table      | <input type="checkbox"/> Metal Bench       |
| <input type="checkbox"/> Planter            | <input type="checkbox"/> Litter receptacle | <input type="checkbox"/> Drinking Fountain |
| <input type="checkbox"/> Trail marker signs | <input type="checkbox"/> Other             | <input type="checkbox"/> Memorial plaque   |

Proposed location: \_\_\_\_\_

Description of request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Desired plaque inscription: (see applicable size and font details in full policy document)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mounting option:       in ground                       on approved object or fixture

**For City Use Only:**

Current market value estimate for donation: \$ \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Comment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_