



Memorial Tree and Bench Application

(Please Print)

Contact Name: _____

Contact Address: _____

Contact Phone: _____

Contact Email Address: _____

Please Circle Memorial Type: *Tree or Bench*

Memorial in the name of: _____

Location (1st Choice): _____

Location (2nd Choice): _____

For Memorial Bench Only

Requested plaque inscription (Up to three lines. 60 characters max):

For Memorial Tree Only

Please Circle Type of Tree: *Flowering or Shade*

My signature below states that I understand this donation is for the useful or physical lifespan of the tree or bench purchased, as deemed by the Parks and Recreation Director or designee. In addition, I understand that the City of Sterling Heights is the ultimate authority for determining the location and/or type of tree or bench that is purchased as well as the final verbiage on the memorial plaques, and that the bench or tree may be moved at the discretion of the City.

Signature: _____ **Date:** _____