

## **Memorial Tree Program Request Form**

## **Sponsor Information**

First Name						
First Name			Last Name			
Street Number Street Name		me			Suite/Unit Number	
City		Province		D,	ostal Code	
City			Trovince	' '	ostal Code	
Telephone Number		Alt Phone Numb	er	Email	mail	
Preferred Tree Locat	ion					
- 15 11 (15						
Tree ID# (If you hav	tree)					
Preferred Park						
Preferred Species						
Plaque Wording						
	<u> </u>		1.1.11			
					to say. If you would like a	
nicture on the place		ingii i coolutioni co	by to inclinionally	n ogrann	WVCharia.ca. The City	
picture on the plaque retains the right to						
picture on the plaque retains the right to						



## **Memorial Tree Program Request Form**

Total Cost: \$765 + HST

## The Fee covers:

- 15-year sponsorship, plaque, and installation, general maintenance of the tree.
- The City will replace the tree during the time frame of the sponsorship at the City's discretion.
- Due to damage or vandalism The city will replace the plaque at the cities expense for one year after the initiation of the sponsorship. After that the city will replace the plaque at the cost of the sponsor.

Memorial Tree Request Forms can be emailed to memorialprogram@welland.ca or dropped off to address below.

Payment can be made at: Welland Community Centre 145 Lincoln Street Welland, On L3B 6E1 ATTN:Forestry