

**TREE DEDICATION ORDER FORM**

*The next Tree Dedication Ceremony will be held in fall  
Deadline to purchase a tree for inclusion in the next Ceremony is July 1, 2024*

**I would like to purchase a tree to be planted in (please check below):**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Betty Russell Park      | <input type="checkbox"/> Hunt Club Park    | <input type="checkbox"/> South Road Park  |
| <input type="checkbox"/> Cedar Park              | <input type="checkbox"/> Kings Park        | <input type="checkbox"/> Southridge Park  |
| <input type="checkbox"/> Chittenden Park         | <input type="checkbox"/> O'Plaine Park     | <input type="checkbox"/> Timberwoods Park |
| <input type="checkbox"/> Christine Thompson Park | <input type="checkbox"/> Prairie Oaks Park | <input type="checkbox"/> University Park  |
| <input type="checkbox"/> Concord Oaks Park       | <input type="checkbox"/> Providence Park   | <input type="checkbox"/> Viking Park West |
| <input type="checkbox"/> Esper Petersen Park     | <input type="checkbox"/> Ravinia Park      | <input type="checkbox"/> Village Park     |
|  | <input type="checkbox"/> Shaw Park         | <input type="checkbox"/> Vineyard Park    |
|  |  | <input type="checkbox"/> Westgate Park    |

<b>This gift is:</b> <input type="checkbox"/> In honor of		<input type="checkbox"/> In memory of
Name of Recipient		Date of purchase
Donated by: (What should the tree marker say?)		
Contact name	Day & Evening Phones	
Address		
City/State/Zip	Email Address	

**Tree species (please check below):** Note: Tree cultivars may be requested if available. Final cultivar will be determined by the Gurnee Park District.

- |  |                                      |  |  |
|--|--------------------------------------|--|--|
| <b>Shade</b>                                 | <b>Shade</b>                         | <b>Ornamental</b>  | <b>Evergreen</b>                                     |
| <input type="checkbox"/> Hybrid Elm          | <input type="checkbox"/> Honeylocust | <input type="checkbox"/> River Birch                                       | <input type="checkbox"/> Eastern White Pine          |
| <input type="checkbox"/> Hackberry           | <input type="checkbox"/> Linden      | <input type="checkbox"/> Japanese Tree Lilac                               | <input type="checkbox"/> Norway Spruce               |
| <input type="checkbox"/> Ginkgo              | <input type="checkbox"/> Maple       | <input type="checkbox"/> Flowering Pear                                    | <input type="checkbox"/> Douglas Fir                 |
| <input type="checkbox"/> Kentucky Coffeetree | <input type="checkbox"/> Oak         | <input type="checkbox"/> Serviceberry:<br>o single stem or<br>o multi-stem | <input type="checkbox"/> Dawn Redwood<br>(deciduous) |
|  |                                      |  | <input type="checkbox"/> TBD                         |

**Please check all that apply:**

- Tree (includes tree marker)      \$400       Wall Plaque--(Optional-for the home)      \$ 75

You may charge your payment by completing the credit card information below or make a check payable to: **Gurnee Park District** and mail to: Gurnee Park District, 4374 Old Grand Avenue, Gurnee, IL 60031. For more information, please call Sarah at (847)599-3781. If you are charging your tree, you may fax completed form to (847)623-8121. A confirmation letter will be sent to you.

<b>Total Amount Paid:</b>	<input type="text"/>
<b>Method of Payment:</b>	
<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check # _____	
<b>Cash, checks and credit card transactions are processed as they are received</b>	
10/1/2019	

Credit Cards Accepted:	<b>VISA    MasterCard    Discover</b>																		
Cardholder Name	_____																		
Card Number:	<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td> </td> </tr> </table>					-					-				-				
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Expiration Date	____/____/____    Amt of Charge \$_____																		
Authorized Signature	_____																		