Memorial Bench Request

Make a contribution that has lasting power!



Name:		
Address:		
Home Phone:	one: Cell Phone:	
Email Address:	BARDED CO.	
Please Circle Memorial Type:	6 Foot Bench (\$2,100.00)	8 Foot Bench (\$2,500.00)
Location (1st Choice):	of the second	
Location (2nd Choice):		
Location (3rd Choice):		Diagon fill out this forms and Mail/Door off to
Plaque Inscription:		Please fill out this form and Mail/Drop off to: West Chicago Park District
10.5" x 3" plaque - Up to 4 lines, 28 Cl Line, including Spaces	haracter Max Per	201 W. National Street West Chicago, IL 60185
		Email to: dspence@we-goparks.org
My signature below states that I under		— lifetime bench purchased. In addition, I understand
purchased as well as the final verbiage		ermining the location and/or type of bench that is
Signature:		Date:
West Chicago Park District - 201 W. Natio	nal Street, West Chicago, IL 60185 - (6.	30) 231-9474 - info@we-goparks.org - www.we-goparks.org