TREE DONATION ORDER FORM

| Name: | Phone: | Email: | |
|---|--------|----------------------|---------------------------------------|
| Address: | | City: | State: Zip: |
| Graham Park Requested*: | Nati | ive Tree Requested*: | |
| Indicate personalized information below with up to 35 characters per line including | | 5 5 | marker featuring a maximum of 5 lines |
| Line 1: | | | |
| Line 2: | | | |
| Line 3: | | | |
| Line 4: | | | |
| Line 5: | | | |

Please mail the completed form with a check payable to Friends of Graham Recreation & Parks to: Friends of Graham Recreation & Parks, PO Box 817, Graham, NC 27253

*All engravings are subject to approval by the Graham Recreation & Parks Department. The final tree location and the type of tree will be determined based on need by the Parks Team.