

Memorial Tree with Marker Order Form



Date: _____
Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone: _____
Alternate Phone: _____
E-mail Address: _____

Trees ordered between April 1st and October 15th will be planted between October and December of that year, weather permitting. Trees ordered after that time will be planted the following spring. Memorial trees have a five year replacement guarantee. If a tree should die within five years of its planting, please notify the Landscape Supervisor, and it will be replaced during the next planting season.

Please indicate the type of tree you are requesting and the location:

Tree Preference

(Shade Tree, Flowering Tree, Evergreen) _____

Location Preference

(Specific Park) _____

Marker Information

The inscription may be up to three lines with 16 spaces per line. Punctuation marks and spaces between words count as spaces. Please fill in the blanks below with the inscription you would like.

Cost: \$600.00 (Check or Money Order only, please. Checks should be made payable to Board of Park Commissioners.)

Mail this form and check to:

**Fort Wayne Parks & Recreation
Attn: Memorial Tree Program
705 East State Blvd.
Fort Wayne, IN 46805**

For more information call or email:

**Eric Ummel, Landscape Supervisor
260-427-6402
eric.ummel@cityoffortwayne.org**