

The Parks Memorial Sponsorship Program is a tribute to honour one or more persons for his/her past or present contribution to the community, to a service club project, in memoriam, as well as for other special events.

The City of Port Alberni invites individuals, organizations or service clubs to explore opportunities to sponsor a memorial tree or rock. Picnic tables and park benches are not available for sponsorship at this time.

All Memorial Sponsorship requests and donations must be deemed acceptable by the Parks, Recreation and Culture Department.

- Sponsor agrees to City of Port Alberni location of memorial selection.
- Sponsor agrees to City of Port Alberni's right to relocate the park bench, picnic table, tree or rock.
- City guarantees to maintain and/or replace damaged memorial selection.
- Payment is due on confirmation of order.

Name of Sponsor \_\_\_\_\_

Date \_\_\_\_\_

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### **Park Bench**

A variety of park bench styles strictly dependent on final location of memorial and availability of materials.

- Cost of this sponsorship:** \$2,500
- Graphic Image:** add \$100

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### **Picnic Table**

A variety of picnic table styles strictly dependent on final location of memorial and availability of materials.

- Cost of this sponsorship:** \$2,500
- Graphic Image:** add \$100

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### **Tree or Rock**

Trees to be planted shall have a caliper size of 50 to 70 mm as measured 1.5 metres above the ground. The variety and size of the tree is strictly dependent on final location of memorial and availability of materials.

- Cost of this sponsorship:** \$1,500
- Graphic Image:** add \$100

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### **Preferred Location of Memorial**

**1st Choice:** \_\_\_\_\_

**2nd Choice:** \_\_\_\_\_

**3rd Choice:** \_\_\_\_\_

*Please note the above are choices only and not deemed the final location of any memorial. The final location of all memorials are a result of an agreement between PR&C and the sponsor(s).*

## **Plaque Inscription**

**Plaque Size 3" x 9"**

Five lines of forty (40) letters and spaces per line permitted

|        |  |
|--------|--|
| Line 1 |  |
| Line 2 |  |
| Line 3 |  |
| Line 4 |  |
| Line 5 |  |

## **Sponsorship Inscription**

Name of Sponsor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_

Income Tax Receipt Information - As above or:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_

Donation Amount \$ \_\_\_\_\_