



Memorial Tree with Deed Order Form

Date: _____

Donor's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email 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 Park office and it will be replaced during the next planting season.

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

Tree Type Preference (Shade, Flowering, Evergreen): _____

Location Preference (Specific Park): _____

A parchment Memorial Deed bound in a padded portfolio will be provided to the donor as a permanent record of this special tree's significance and location with GPS coordinates. The Parks and Recreation Department will maintain a permanent record of the Memorial Deed. Please use the form below to show what you would like the final document to say:

___ In Recognition of

___ In Memory of

___ Other (please specify below)

Cost: \$500 (Check or Money Order only, please. Checks should be made payable to New Haven Park Board.

Mail this form and check to: New Haven-Adams Twp. Parks & Recreation

Attn: Memorial Tree Program

PO Box 157

New Haven, IN 46774

For more information or questions, please contact the Park Office at 749-2212.