



Memorial Program Standard Agreement

Please check box(es): Bench Brick Tree

Location of Donation: _____

Name: _____ Phone: _____

Address: _____

Email : _____

PLEASE PRINT. Indicate what you would like the bench plaque or brick to read using the boxes below.

S	A	M	P	L	E		T	E	X	T				

Please Note: A bench plaque allows for 3 lines and number of characters will be determined by bench selected and is included in your contribution. A brick can contain up to three lines of 15 character each, ALL CAPS, including spaces. All text is subject to approval by the District Administrator. **A proof of plaque will be sent to you for approval before order is placed.**

Please make checks payable to the Carmichael Parks Foundation, a 501(c)3 Public Charity. Donations are fully tax deductible to the extent provided by law. Fed ID # 26-4274059.

Amount: _____ Check Number: _____ CC: Visa Mastercard

Card Number: _____ Exp: _____ CVV: _____

Submit Completed Forms To:

Mail to: CRPD District Office
5750 Grant Avenue
Carmichael, CA 95608

In Person: La Sierra Recreation Office
5325 Engle Road Suite 100
Carmichael, CA 95608

Donor Signature: _____ Date: _____

CRPD Approval: _____ Date: _____