

# BENCH MEMORIAL FORM

Complete the following form and return with payment to:

- IN PERSON** any Oswegoland Park District facility
- MAIL** Oswegoland Park District  
313 E. Washington St, Oswego, IL 60543
- ONLINE PAYMENT AVAILABLE**

## DONOR INFORMATION (individual or group)

Name \_\_\_\_\_

If a group donation, list a contact person \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## GIFT LETTER (if applicable)

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

## BENCH DONATION

Preferred Park \_\_\_\_\_

Preferred Location in Park \_\_\_\_\_

*(ex: Prairie Point Community Park. Location subject to Park District approval.)*

## BRASS PLAQUE

Plaque (2"x10")

Print (or type), one letter per spot

Spaces and punctuation marks count as one letter

Maximum of 4 lines, 56 letters per line for upper and lowercase letters

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# BENCH MEMORIAL

## OSWEGOLAND PARK DISTRICT

