



# 2018/19 MEMORIAL TREE ORDER FORM 2018 INTRODUCTION SPECIAL

What a great way to memorialize your support of Zionsville Community Schools and show your Eagle Pride!

**ONLY FIVE TREES AVAILABLE!**

Naming Rights Given- In Honor, In Memory, In Recognition of any Individual(s) or Entity in Support of ZCS and the Zionsville Alumni Association

NOTE: The Zionsville Alumni Association is a 501(c)(3) nonprofit organization.

Your contribution is tax-deductible to the extent allowed by law. No goods or services were provided in exchange for your financial donation.

\_\_\_\_\_ One Tulip Poplar (Indiana State Tree) Naming Rights ..... \$1,000.00 each

\_\_\_\_\_ One "Ace of Hearts" Redbud Naming Rights ..... 750.00 each

\_\_\_\_\_ One "Ivory Silk Lilac" Naming Rights ..... 750.00 each

\*PLEASE OUTLINE IN THE BOX BELOW, WORDING YOU REQUEST ON THE PLAQUE. THIS WILL BE CONFIRMED BEFORE ENGRAVING AND INSTALLATION OF THE MARKER.

Extra Donation to ZAA \$ \_\_\_\_\_ Total Amount Enclosed: \$ \_\_\_\_\_

Check No. \_\_\_\_\_ Visa/MC# \_\_\_\_\_ --- --- --- Exp: \_\_\_\_\_ --- --- CVV: \_\_\_\_\_

Your Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ --- --- ---

Your Email Address: \_\_\_\_\_

Your Address: \_\_\_\_\_ City \_\_\_\_\_ St: \_\_\_\_\_ Zip \_\_\_\_\_

NOTE: If this is a gift or memorial and you would like us to notify the honoree or family, please include the contact information below. Notify honoree of your name? (Yes) \_\_\_\_\_ (Leave Anonymous) \_\_\_\_\_

Honoree's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ --- --- ---

Address: \_\_\_\_\_ City \_\_\_\_\_ St: \_\_\_\_\_ Zip \_\_\_\_\_

Please return completed Order Form via email to: zionsvillealumni@gmail.com , fax to: 317-733-2020 or mail to the ZAA at the address below.

**Thank You for Your Support!**

P.O. Box 237 Zionsville, IN 46077 ZionsvilleAlumni.org

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