

MEMORY TREE PROGRAM

ADOPT-A-TREE/PLANT A TREE APPLICATION

Your Name: _____ Today's Date: _____

Address: _____ Phone: (____) _____

_____ Email: _____

Location: See map at Village Hall for available locations for newly planted trees.
See attached list of available trees to be adopted.

_____ PLANT A TREE desired location _____

_____ Ornamental Pear _____ Flowering Cherry

_____ ADOPT-A-TREE tree number: 1st choice _____ 2nd choice _____

Please print 3 line wording for plaque following guidelines:

Cost:
ADOPT-A-TREE
\$ _____

PLANT-A-TREE
\$ _____

Make payable to the Village of Suffern

Applicant Signature: _____ Date: _____

Approved:

_____ Date

John F. Meehan

Date

_____ Date

Sheila Foster

Date

_____ Date

Sandy Stead

Date