

Erie MetroParks

James H. McBride Arboretum
Memorial Tree Planting Program
Planting Information Sheet

Donor Name _____
Donor Address _____
City _____ **State** _____ **Zip Code** _____
Telephone Number _____
Donated in Memory of _____
Donation Level _____

- Planting / Tree Type:
- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Shrub | <input type="checkbox"/> Flowering Tree |
| <input type="checkbox"/> Shade Tree | <input type="checkbox"/> Ensemble Planting
Or Display Bed |

Plant Name(s) _____

Year Planted _____

Location _____



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