

Tree Sponsorship Form

Tree # _____

Please provide the following:

Contact Name _____

Contact Cell Phone _____

Contact Email _____

Sponsorship Type:

Business _____ **Business Name Only on Tree (\$150 or **\$500)**

Name of Business _____

Payment Received _____

Date and Check Number & \$\$

Personal / Family _____ **(\$150)**

Name On Tree _____

Example: The Smith Family or John & Sue Smith

Payment Received _____

Date and Check Number & \$\$

Memorial Tree _____ **(\$150)**

In Memory of _____

Example: Sue Smith, Uncle John, etc

from _____

Example: John & Sue Jones

Payment Received _____

Date and Check Number & \$\$

QUESTIONS / ADDITIONAL INFORMATION FOR THE HOLIDAY TREE WALK

Please Contact Mark Kohler 734-755-1518 / Bruce Diven 734-818-6808

