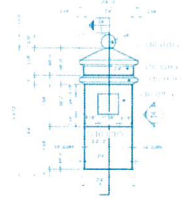




Broad Commons Sponsorship Form



Donor Information

NAME		
ADDRESS		
CITY	STATE	ZIP
PHONE	EMAIL	

Select Amenity to be Sponsored

NOTE: Please indicate specifically which one you are requesting using the code from the attached park map. Selection cannot be guaranteed if its already been sponsored. You will be contacted to make another choice if your selection is not available.

<input type="checkbox"/>	Mercer Pillar Gateway	Gateway Number: _____	Includes 8x8 engraved brass plaque	\$8000
<input type="checkbox"/>	Single Mercer Pillar	Pillar Code: _____	Includes 6"x6" engraved brass plaque	\$5000
<input type="checkbox"/>	Park Bench	Bench Code: _____	Includes 2"x6" engraved brass plaque	\$1500
<input type="checkbox"/>	Plaza Bench	Bench Code: _____	Includes 2"x6" engraved brass plaque	\$1500
<input type="checkbox"/>	Victorian Streetlight	Light Code: _____	Includes 2"x4" engraved brass plaque	\$3000
<input type="checkbox"/>	Water Fountain	Fountain Code: _____	Includes 2"x 4" engraved brass plaque	\$2500

*Donations may be tax deductible—consult your tax advisor

TOTAL AMOUNT ENCLOSED: _____

Select Text for Plaque Inscription

Maximum Character Limits:

Gateway 8"x8"— 5 lines & 100 letters

Pillar 6"x6"—4 lines & 80 letters

Benches 2"x6"—3 lines & 60 letters

Streetlights 2"x4"—3 lines & 40 letters

Drinking Fountain 2"x4"— 3 lines & 40 letters

Note: Blank Spaces between words count as characters. Line breaks and text size may get reformatted as needed for typesetting.

Please only submit text that fits the selected plaque size for the amenity as shown above.

Line 1

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Line 2

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Line 3

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Line 4

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Line 5

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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SIGNATURE: _____

DONOR _____

DATE _____

