



Department of Parks and Recreation

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H.F. Chip Faver, Director

Parks Gift Catalog Order Form

Name: _____

Address: _____

City: _____ St.: _____ Zip Code: _____

Phone No.: _____

Donated (Select One:)

In Memory Of: _____

In Honor Of: _____

By: _____

Anonymously

Enclosed is my check in the amount of \$ _____

Please use my donation to purchase (item #): _____

Description: _____

For (name of park or program): _____

If no preference is listed above the Parks Service will make the determination.