



# Commemorative Gift Form

Name of Person(s)

To be Honored: \_\_\_\_\_

Enclosed is my gift of: \$ \_\_\_\_\_

### Gift From:

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_

What is your relationship to the Honoree? \_\_\_\_\_

Why would the Honoree be pleased about a contribution to Greenbelt?  
\_\_\_\_\_

### Reason for the Contribution:

\_\_\_ In Honor of:

\_\_\_ Birthday      \_\_\_ Holiday

\_\_\_ Wedding      \_\_\_ Anniversary

\_\_\_ Other \_\_\_\_\_

Event Date: \_\_\_\_\_

Special Gift Designation (if any): \_\_\_\_\_

\_\_\_ In Memory of:

Date Deceased

(if known) \_\_\_\_\_

Town of Last Residence: \_\_\_\_\_

### Send Notification to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship to Honoree? \_\_\_\_\_

Greeting or Message: \_\_\_\_\_

(Please include a short message you would like included when we notify the individual being honored.)

### Payment Method:

\_\_\_ My check is enclosed. Please make payable to Essex County Greenbelt.

\_\_\_ Please charge my:      \_\_\_ Visa      \_\_\_ MasterCard

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Thank you for your generosity!**