

Donor Order Form

Kiwanis Flowering Tree Project Sparks "Cascades" Park

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBERS: HOME _____ CELL _____

EMAIL ADDRESS: _____

Please Mark { > } One or More For Multiple Donation

- | | | | |
|-------------------|-------|-----------------------|-------|
| 1. Cleveland Pear | \$500 | 5. Golden Raindrops | \$600 |
| 2. Kwanzan Cherry | \$500 | 6. Pin Oak | \$650 |
| 3. Eastern Redbud | \$500 | 7. Crimson King Maple | \$650 |
| 4. Crabapple | \$600 | 8. Autumn Blaze Maple | \$650 |

Would you like to be part of an established volunteer work force for perpetual care of trees?

YES: _____ NO: _____

Make checks payable to: KIWANIS FLOWERING TREE PROJECT

Send checks to the address below:

Kiwanis Flowering Tree Project
529 Rutledge Street
Jackson, Michigan 49203
C/O Stan Mazur- Treasurer

Email this order form to maz352@comcast.net or mail to the above address.

CHECK# _____

AMOUNT: _____