

Memorial Bench Program Order Form

Residents may purchase a 6' memorial park bench with a two line 2 ½ " x 10" Corian Plaque in honor or in memory of a family member, friend, pet, or associate. The bench will be placed at either Camelot Park or Macoby Run Park as requested by the donor where relatives and friends can visit and remember a loved one.

Donor Information: (Please Print)		
First Name:	Last Name:	
Mailing Address:		
City:	State:	Zip Code:
Email:		
Phone number: (Home)	(Cell)	



Requested Park Bench location:	Location Description: (You may provide a sketch or photo if you	
☐ Camelot Park	prefer. Simply indicate "See Attached".	
☐ Macoby Run Park		

Type of Gift: (Please Print)							
You may make your gift in honor of or in memory of a family member, friend, pet, or							
associate. Please make your selection		name of the person to be honored					
EXACTLY as it is to appear on the	bench plaque.						
☐ In Honor of:							
Name:							
☐ In Memory of:							
Name:							
Upper Hanover Township will als mailed to a designated recipient.	so create an Hono	or/Memorial Certificate which will be					
Please provide the name EXACTLY	Y as it should appe	ar on the certificate.					
In Memory/Honor of							
Please provide the name(s) of the in should appear on the certificate.	ndividual(s) reque s	sting the certificate EXACTLY as it/they					
AS REQUESTED BY Please provide the name and mailing address for the person who should receive the certificate.							
					Name:		
Address:							
City:	State:	Zip Code:					
Payment Information:							
6' Park bench							
With 2 ½" x 10" Corian Plaque	\$72	5.00					
☐ My check is enclosed payab	le to "Upper Hand	over Township"					
	Please	mail completed order form and check to:					
Signature							
	Up	pper Hanover Township					
	17	04 Pillsbury Road					
Date	P.	P. O. Box 27					
	Ea	st Greenville, PA 18041					