# Township Park Bench and Picnic Table Sponsorship Application Form

### **Applicant Information**

**Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organization/Business (if applicable):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing Address:**

**City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_\_\_\_\_\_\_ **ZIP Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **Sponsorship Selection**

Please indicate your sponsorship choice below:

1. **Sponsorship of Existing Bench/Picnic Table**
   * **Cost:** $150
   * ☐ I would like to sponsor an existing bench
   * ☐ I would like to sponsor an existing picnic table
   * **Preferred Location (if any):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     *(Note: The Township will work with you to select an available bench or table.)*
2. **Sponsorship of New Bench/Picnic Table**
   * **Cost:** $600
   * ☐ I would like to sponsor a new bench
   * ☐ I would like to sponsor a new picnic table
   * **Preferred Location (if any):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     *(Note: The Township will work with you to select a suitable location for installation.)*

### **Plaque Information**

Please provide the inscription for the plaque (maximum 200 characters):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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### **Payment Information**

**Total Amount Due:** $\_\_\_\_\_\_\_\_\_\_\_\_

**Payment Method:**

* ☐ Check (payable to Marathon Township)

### **Terms and Conditions**

By signing below, I agree to the terms and conditions outlined in the Township Park Bench and Picnic Table Sponsorship Policy.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **Submission Information**

Please return this completed application form along with your check to:

**Marathon Township**4575 Pine St  
Columbiaville, MI 48421  
Phone: (810) 793-2002