



PARK AMENITIES RECOGNITION/CELEBRATION PROGRAM

DONOR FORM

DONOR CONTACT

Name:
Address:
Home Phone No.:
Cell No.:
Email Address:

ALTERNATE CONTACT #1 (optional)

Name:
Address:
Home Phone No.:
Cell No.:
Email Address:

ALTERNATE CONTACT #2 (optional)

Name:
Address:
Home Phone No.:
Cell No.:
Email Address:

DONATION INFORMATION (to be filled in by the City)

Park Name:
Location in Park:
Amenity Description:

- Amenity Type
- Manufacturer and Model
- Plaque Type
- Plaque Wording

Total Donation Amount:

I AGREE TO THE FOLLOWING CONDITIONS:

1. I agree to the **Program Guidelines – 2020** (separate attachment) which cover the selection of the site, the specific location for the amenity, and the wording on the plaque.
2. I understand that plaques and amenities will not be maintained in perpetuity. They will be removed when repair is no longer feasible (as determined by the City) due to damage and deterioration from the natural elements or otherwise.
3. I understand that the plaque will be given to me (or my alternate contact if I cannot be located) when the amenity is removed at the end of its life cycle (as determined by the City). In the event that I or my alternate contact cannot be located, the plaque will be stored at a City facility for a period of five (5) years, after which it will be repurposed or destroyed.
4. The amenity may be temporarily removed for the purpose of maintenance, construction or park festivals and activities.
5. Public access to the site or the amenity location may be restricted if it is deemed unsafe due to adverse weather conditions or construction.
6. In the event of vandalism, the City will make reasonable efforts to restore the amenity or the plaque back to its original state but will not replace either item.
7. I understand that the City may permanently change the location of the amenity due to park and road improvement or reconstruction work. I (or my alternate contact if I cannot be located) will be informed of this change.
8. I understand that it is my responsibility to provide the City with updated personal contact information.
9. I understand that in the event that I adopt a bench I accept it in its current condition and age and understand that the lifespan of the adopted bench may be less than that of a new one.
10. I understand that upon installation of the donation the plaque cannot be altered.

Donor Signature:

Date:

Updated March 18, 2020

Personal information contained on this form is collected under the authority of the *Municipal Act, 2001*, S.O. 2001, c. 25 and will be used to administer this program and to contact the donor or the alternate contacts. Questions about this collection should be directed to: Manager Parks & Open Space, Capital Works Department, 426 Brant Street, P.O. Box 5013, Burlington, ON L7R 3Z6 (905) 335-7600.