

Hardin-Houston School District

MEMORIAL TREE(S) APPLICATION FORM

Date of Application: _____

Name: _____

Address: _____

Phone: _____

Tree and Stone Information

1. The tree is in memory of whom? _____
2. The tree will be purchased/planted by whom? _____
 - The District will need to approve the Nursery, from which the tree(s) will be purchased from and planted by, first before the procedure can take place.
3. Which type of tree will be purchased (tree must be at least 2-2 ½ inches in diameter)? _____
4. Were arrangements made for a stone? _____

Terms Agreement

I agree to take responsibility of ordering the tree and stone from one of the above mentioned nurseries, and I assume full responsibility of payment for both the tree and stone and all financial transactions will take place between myself and the approved vendors.

Signature of Person Assuming Responsibility

District Personnel Approval Date