

Phone: (250) 642-1634 email: info@sooke.ca Fax: (250) 642-0541 website: www.sooke.ca

Memorial Plaque Contribution Application

Sponsor Information			
Name:			
Organization:			
Address:			
City			
Phone:			
Email:			
f there is more than one sponsor, please include on a separate sheet			
Memorial Plaque Options			
☐ Memorial Plaque on Commemorative Item with plaque returned to Sponsor at end of 10-year tenure. (\$2000*)			
☐ Memorial Plaque on Commemorative Item with plaque affixed to Memorial Structure at end of 10-year tenure. (\$2500*)			
☐ Memorial Plaque on Commemorative Item with plaque affixed to Memorial Structure after 20-year tenure. (\$3500*)			
☐ Memorial Plaque on Memorial Structure (\$750*)			
* Fees listed are subject to change and can be found in the <u>Fees and Charges Bylaw No. 752</u>			
Payment Information			
Payment must be made in advance and may be made by:			
☐ Cheque (payable to the "District of Sooke")			
Cash			
□ Interac			

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Sponsor Declaration		
I ackno	wledge that:	
1.	My Contribution is to cover the cost of the Memorial Plaque subject to the <i>Memorial Plaque Contribution Policy (CO-002)</i> .	
2.	All Memorial Plaques will be the same size and print. I will provide the wording as outlined in the application form.	
3.	The Memorial Plaque will be affixed to and remain on the Commemorative Item for the term selected on this application in its original location, or in an area near its original location, after which the District of Sooke will follow my wishes as outlined in the application form.	
4.	In the case of theft, vandalism, or environmental impact to the Commemorative Item or Memorial Plaque, the District of Sooke reserves the right not to replace or to repair them.	
5.	I will not scatter and/or inter cremated remains in accordance with the <i>Cremation,</i> Interment and Funeral Services Act.	
6.	I will not place flowers, pictures, photographs, notes, gifts, wreaths, commemorative stones, etc. at or near the Commemorative Item.	
7.	My contribution in no way constitutes ownership of the Commemorative Item or Memorial Structure, the land upon which it is situated, or the surrounding lands.	
8.	It is my responsibility to ensure that my contact information is kept current with the District of Sooke.	
Sponso	or Signature Date	

Change of Address information can be emailed to parks@sooke.ca

Plaque Wording				
Leave one space between words. A punctuation mark counts as a space. You may use an ampersand (&) for "and". You may not use day/month of birth and death. Years are acceptable.				
Plaques standards are as follows:				
Size:	3x8" square corners			
Material:	bronze			
Font Style:	Goudy Old Style			
Number of lines: 4				
Line 1				
Line 2				
Line 3				
Line 4				

Please take a copy of this form for your records.

For Office Use Only

Receipt Number:		
File Number:		
Initial Location:		
Commemorative Item:		
Location - End of Tenure:		