



Legacy Bench Request Form

Return completed form to: Metroparks Toledo, Attn: Philanthropy, 5100 W. Central Ave., Toledo, OH 43615.
Upon review, you will be contacted to confirm bench details and to make your donation.

Donor Contact Information:

Name: _____

Address: _____

City/State/Zip Code: _____

Phone: _____

Email: _____

Bench and Plaque Information:

Requested Metropark for Bench Placement: _____

Inscription may include up to 4 lines of text which includes 1 heading line.

Heading Line:

In Memory of In Honor of Other (specify): _____

Custom Plaque Text (up to 24 characters per line, including spaces and punctuation marks):

Metroparks Toledo reserves the right to approve the content of the message on the plaque, including the right to approve and reject names and messages that are considered to be inappropriate, illegal or inconsistent with the mission of Metroparks Toledo.