

Authorized Signer

Santa Cruz County Parks

979 17th Avenue Santa Cruz CA, 95062

Ph: (831) 454-7901 – Fax (831) 454-7940

www.scparks.com

County Park Ocean View Comemoration Waitlist Form

In order to place your name on the wait list for future commemoration placement, please email

this form to: $\underline{reservations@scparks.com}$

Customer Account Information:				
Name				
Email		Phone# ()		
Home address	3		City	
State	Zip Code	Gender	Birthdate	
Please fill out	and select the following	details:		
Commemorat Tree Bench Table Speacialty	ive Option Feature (Please provide speacil	ity project idea, ie. garden, wis	shing well, arbor)	
☐ North Coul	all that apply for commemora	ey Hound Rock)	Podkyjow)	
				
Please provide	e any information you wou	uld like to go along wit	h the waitlist form:	
	leted form is returned to th re openings at the selected		Parks will add your request	to the current

Date