

FESTIVAL OF TREES 2009
Participation Form

▪ **TREE SIGN INFORMATION**

TREE NAME (Please print.) _____

(We reserve the right to alter tree names when there are trees with the same or similar names.)

DONOR _____

(Business/Organization/School/Individual(s) donating the tree)

Please note - Tree signs cannot accommodate long tree names or lengthy group names.

▪ **CONTACT INFORMATION**

Contact Person _____

Address _____

Daytime Tel. _____ Evening Tel. _____

Email Address _____

▪ **TREE INFORMATION**

Tree Size _____ 1 ½ - 2 ft. _____ 3-4 ft. _____ 5-6 ft. _____ 7-8 ft. _____ 9-10 ft.

Tree Set-up – Please choose which time you prefer for set up

_____ Wednesday, November 11 (4:00 – 8:00 PM)

_____ Thursday, November 12 (4:00 - 8:00 PM)

_____ Friday, November 13 (4:00 - 8:00 PM)

_____ Saturday, November 14 (10:00 AM - 6:00 PM)

_____ Sunday, November 15 (10:00 AM - 6:00 PM)

This information **MUST BE RETURNED BY OCTOBER 28, 2009** to
Methuen Festival of Trees, c/o C. Barbagallo, 123 North St., Methuen, MA 01844.

You may also email this information to us at info@methuenfestivaloftrees.com

***We cannot guarantee any late information will be included in the program book.
The Festival is a family event. Please keep this in mind when planning your tree.***

Any special size requirements need to be approved by the Tree Committee. Please describe on the back of this sheet.

THANK YOU FOR PARTICIPATING!!