

Community Giving

HELP MAKE A DIFFERENCE *in Sparks!*

Be a part of the legacy of enhancing and preserving the City of Sparks beautiful parks and trails and providing recreational opportunities for all ages and abilities! Contribute individually, or recognize honor or celebrate a life or important occasion. Mail your completed form to the following address:

Spark Parks & Recreation • 98 Richards Way • Att: Community Giving • Sparks, NV 89431

Details: 775.353.7857 or email recinfo@cityofsparks.us

Name: _____ Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone/Cell: _____ Email: _____

Select from the following:

(Refer to the Community Giving Brochure for a detailed description of each item.)

Yes! I would like to join Partners in Parks & Recreation:

Giving Circle \$1,000 & above Benefactor \$500-\$999 Supporter \$250-\$499 Friend \$35-\$249

Individual Business Community organization Other: _____

Contributors will be recognized in the Sparks Parks & Recreation seasonal activity guides and annual report.

Please list my/our name(s) as follows: _____

Check here for anonymous listing

RECREATION

- Create a Splash \$40
- Make a Pitch for Sports \$55
- Outfit a Youth Sports Team \$100
- Healthy Beginnings, amount: _____
- Youth Scholarship Fund, amount: _____
- Workreation \$2,000

COMMUNITY PROGRAMS

- Volunteer your time
- Sponsor a Special Event, monetary or in-kind
- Give with a Bequest, details: 775.353.7857

PARKS AND TRAILS

Perk up our Parks & Trails

- Bike Rack \$300
- Picnic Table \$450
- Horseshoe Pit \$500
- Park Bench (6 ft.) \$600
- Drinking Fountain \$1,500
- Sand Volleyball Court \$2,000

Add 4 x 6 plaque to any of above items for \$200

Donate a Tree

- New tree with plaque \$350
- Existing tree with plaque \$250
- New tree \$200

- Art in the Park, amount: _____
- Put Adventure in a Neighborhood Park (play equip.) \$20,000-\$40,000
- Adopt A Park
- Donate a Living Christmas Tree
- Signage for Sparks Parks, current bid price
- Bring a Trail to Life \$2,000

Contributors will receive special recognition throughout the year!

METHOD OF PAYMENT

Total Amount: _____ My check is enclosed (payable to City of Sparks) Charge my credit card: Visa MC (circle one)

Card #: _____ Exp. Date: ____/____/____ Name on card: _____

Signature: X _____ Date: _____

(See mail to information at the top of the form.)