

# MARITIME MEMORIAL INFORMATION FORM

Use one box for each letter, space, or symbol to be engraved on the Memorial. Engraving will be done as you specify on this form, so be sure that spellings and dates are correct. See reverse for example of engraved area and size information. Feel free to use nickname, or middle initial rather than full name, if needed, to fit the space. Be sure to include spaces between names. Please print clearly or type. Return to address on reverse of form.

Name of Person to be Listed (PLEASE PRINT LEGIBLY):

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Year of Birth:

Year of Death:

Type of Graphic: (Optional)

Describe the type of maritime-related graphic if you would like one to be engraved, such as US Coast Guard emblem, or graphic of person's gillnet vessel, etc. Refer to a previously engraved graphic on the Maritime Wall if known or write the number of the graphic from the approved list. If you prefer to have a customized graphic/artwork image, an additional \$150.00 fee will be charged.

Inscription: Use one box for each letter, space, or symbol to be engraved on the Memorial. The inscription must be maritime-related, such as: Sailor, Gillnetter, Skipper of..., Commercial Fisherman, etc. The Parks and Recreation Director or Maritime Memorial Committee will review all inscriptions.

(PLEASE PRINT LEGIBLY)

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Did the person die at sea? (If so, an anchor will be placed by the name.)

YES  NO

If yes, where did they die? (i.e. Columbia River Bar, Sea, etc.)

\_\_\_\_\_

The cost of a Memorial Engraving is \$500.00 unless you request a customized graphic or artwork image. An additional fee of \$150.00 will be charged for customized artwork or graphic image. Periodically, the cost of engraving does increase, if applicant is put on the wall at a later date, applicant is responsible for any difference in the engraving fee from time of original payment. You may submit a photo or artwork with a customized request. Donations and partial payments toward a memorial may be made, and the engraving will be done after it is paid in full. Only the names of the deceased may be placed on the Memorial. Specific spaces on the Memorial may not be reserved, but payments may be made in advance for inclusion at the death of the person. Donations in excess of the required amount will go toward the general Memorial construction fund. Engravings will be done once a year in late Spring, depending on the weather and the number of engravings to be completed. Your donation to the Memorial is tax deductible under IRS Code Section 170(c)(1).

(OVER-additional Information to be completed)

Checks should be made payable to "City of Astoria". Return completed form and check to:  
**Astoria Parks & Recreation, 1555 W. Marine Drive, Astoria, OR 97103**

If you have any questions, please call the Parks department at  
 (503) 325-7275.

**Person Submitting Information:**

**Date Received:** \_\_\_\_\_

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Relationship to Deceased

\_\_\_\_\_  
 Mailing Address

(\_\_\_\_\_) \_\_\_\_\_  
 Telephone

\_\_\_\_\_  
 City State Zip Code

Amount Paid \$ \_\_\_\_\_

**Other Persons Submitting Donations:**

\_\_\_\_\_  
 Name(s):

Donation: \$ \_\_\_\_\_

\_\_\_\_\_  
 Address

(Street) (City) (State) (Zip Code)

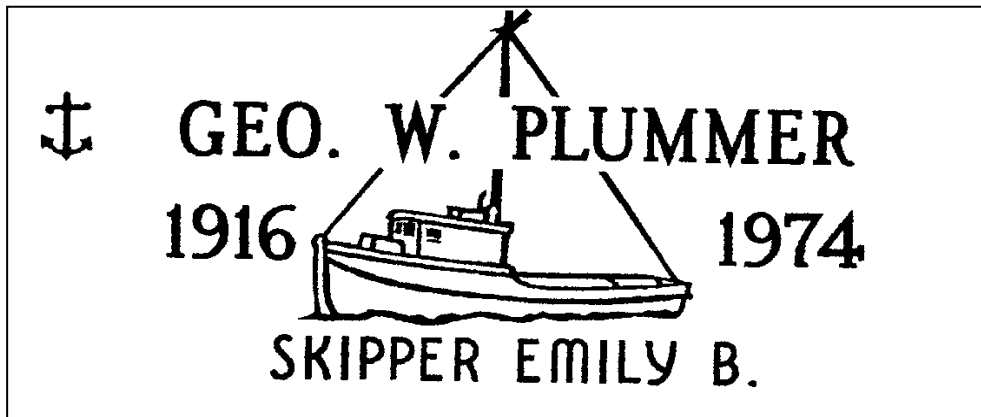
\_\_\_\_\_  
 Name(s):

Donation: \$ \_\_\_\_\_

\_\_\_\_\_  
 Address

(Street) (City) (State) (Zip Code)

**Example of Memorial Engraving on Granite (Memorial Size – No smaller than 4" x 12")**



**FOR OFFICE USE ONLY**

Amount Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Wall Entry No. \_\_\_\_\_

Donor Name: \_\_\_\_\_ Memorial Name: \_\_\_\_\_

Paid by: Cash  Check  Credit Card  \_\_\_\_\_ Receipt # \_\_\_\_\_

Letter Mailed to Donor  Yes  No Date Letter Mailed \_\_\_\_\_ By \_\_\_\_\_

Information on Database  Yes