

# SEASIDE PARK MEMORIAL PLAQUE CONTENT DRAFT

APPLICANT'S NAME (print): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Please draw or type your requested plaque content in the box below. It will be sent to the plaque vendor for a proof and then back to the applicant for approval or changes. Please note—this is for draft purposes only. Any objects other than text must be provided in vector format.

A large rectangular box with a thick black border, intended for drawing or typing the requested plaque content. The box is empty, with four small black squares at the corners.