



**Marimor Legacy Park & Playground  
Butterfly Memorial Garden**

**Butterfly Order Form**

**Contact Name:** \_\_\_\_\_

**Contact Address:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Paid (\$75):** Cash \_\_\_\_\_ Check \_\_\_\_\_

**Text Printed on Butterfly (10-word limit, 2 lines max)**

Examples: “In Memory of John Smith”

“In Memory of John Smith, August 1950 – August 2020”

“In Honor of Jane Doe, a Wonderful Sister”

“In Memory of John Smith & Jane Doe”

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Please make checks payable to **Allen County Board of Developmental Disabilities** with “Butterfly Garden” in memo line. Return this form and payment to Lisa Kirk. As orders are received, decisions will be made about timeframe. A ceremony honoring new butterflies will occur each May. Contact Lisa with any questions: [lkirk@acbdd.org](mailto:lkirk@acbdd.org)