

# Patrons of Beautification

3715 Bridgeport Way W.  
University Place WA 98466  
PH: 253.566.5656 FAX: 253.566.5658



The daffodils blooming in the roundabouts, in parks and on street corners, which herald the arrival of spring in University Place, are paid for with donation dollars. They are the reason University Place is ablaze with color at the arrival of Spring.

The majority of the Beautification projects in U.P. are accomplished through community donations and volunteer work. Attractive bike racks and waste receptacles that line Bridgeport were purchased through donations from citizens we call "Patrons of Beautification." Patrons are residents who want to see improvements to our community and are willing to share their dollars to make our city a more beautiful place to live, work and play. ALL of the dollars that are received go directly into purchase of supplies and materials for beautification projects that wouldn't otherwise be covered by the City's limited resources.



Over the years, donations from Patrons have totaled more than \$50,000! Sponsored projects include City-wide plantings of over 75,000 flower bulbs, the purchase of trash receptacles and bicycle racks, Christmas lighting decorations for Bridgeport and our Bridgeport Way town clock.

## I want to help beautify our Community!

Mail to:  
**Patron of Beautification**  
University Place City Hall  
Attn: Finance  
3715 Bridgeport Way W  
University Place WA 98466

**Sponsorship Level** (circle one)

- |                   |                   |
|-------------------|-------------------|
| \$20 Violet       | \$30 Petunia      |
| \$50 Geranium     | \$75 Daffodil     |
| \$100 Marigold    | \$250 Bulb Buster |
| \$500 Green Thumb | \$_____ Other     |

**Enclosed is my check for \$ \_\_\_\_\_** (Made payable to the City of University Place)

Recognition name \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

**Please charge my credit card \$ \_\_\_\_\_**

(Circle one): Visa / MasterCard / AMEX Card number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV code \_\_\_\_\_ Authorized Signature \_\_\_\_\_

**Billing information**  Check if billing information is the same as above

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_