Park Ridge Park District

PATRON COMMENT FORM

COMMENT MADE BY:

Name_____ Address_____

City_____ State_____ Zip_____ Telephone_____

Email_____

DO YOU REPRESENT:

_____ Yourself
_____ A group or organization (please name) _____

DOES YOUR COMMENT CONCERN:

_____ Park District Facilities or Equipment
_____ Park District Services
_____ Park District Staff

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COMMENTS:

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Additional Comments: (Please continue on reverse side if needed.)

Thank you for your interest in the Park Ridge Park District. Please return this form to: Park Ridge Park District, Administrative Assistant, 2701 West Sibley Avenue, Park Ridge, Illinois 60068 or email to mlucarz@prparks.org.

Signature_____ **Date** _____

PARK RIDGE PARK DISTRICT