TREE FORM: Please send form to cokerg60@gmail.com

1. Your name:

First _____ Last _____

2. Are you the owner of this tree?

- ☐ Yes
- ☐ No
- ☐ I'm not sure

3. Preferred method(s) of contact (check all that apply):

- ☐ Telephone / Mobile — Number _____
- ☐ Email — Email Address _____
- ☐ Text Message — Number _____
- ☐ Postal Mail — Address _____

4. May we contact you via the above method(s) to set up an appointment to physically measure and assess your tree and/or facilitate its nomination?

- ☐ Yes
- ☐ No

5. If your tree qualifies for submission to the registry, will you allow us (the nominators) to submit it for you?

- ☐ Yes
- ☐ No
- ☐ I'm not sure