



Donation request form

Organization: _____

Contact Name: _____

Mailing Address: _____

City/Town: _____ Postal Code: _____

Phone Number: _____ Fax Number: _____

Email: _____

Cash Donation: \$ _____ Date Required: _____

In-Kind Donations (*gift basket etc.*): _____

Describe the purpose of the donation (*event sponsorship, items required, etc.*):

Describe the value to CAREA and we will be recognized (*Logo on program, name at event, newspaper/radio promotion, tickets to attend event*):

Has CAREA sponsored/donated to your organization/event in the past? **YES** **NO**

List any additional relevant information and comments:

The above is correct to the best of my knowledge, and if the donation is approved, the goods and/or money will be used solely and expressly for the purpose listed.

Signature

Date

Mail to: CAREA
Attn: Assistant to the General Manager
Box 6199, 5803 – 42 Street
Innisfail, AB T4G 1S8

Fax to: 403-227-1007