Donation Request Form

Name: _____ Date: _____
Organization/Company: _____ Phone: _____
Organization Website: _____
Summarize the Focus of your Organization/Company: _____
_____
Mailing Address: _____
Street Address City State Zip
Email Address: _____
Tribal Affiliation (if any): _____
If Non-Profit or Tax Deductible, what is number: _____

Donation Type:
___ Monetary Donation/Sponsorship ___ Charitable
___ Golf ___ Political
___ Native American ___ Sports Sponsorship

Event Name: _____
Date of Event: _____
Event Address: _____
Event Description/Purpose of Donation: (be specific: the cause, who benefits etc.)
_____
_____
_____
What specific area will these proceeds benefit: _____
Amount Requesting: _____
Items Requesting: _____
What Percentage of Donation given will be used for cause: _____
How will this donation be used: _____
Check Donations/*If you are approved* – Please provide following information:
Check be made payable to: _____
Mailing Address: _____
Street Address City State Zip

Sports Sponsorship
Dates of Season Start: _____ End: _____
Fee: _____
Name of League (Organization Heading Up - like City of Hastings): _____
Address: _____
Street Address City State Zip
Website: _____
Telephone: _____ Contact: _____
Team Name: _____
-Need to Attach copies of Registration Form with Amount Highlighted
-Checks will be made out to League directly

Donation Coordinator and Tribal Council Do Not meet in regards to Donations
Please Attach Benefit/Sponsorship Flyer with your completed PIIC Donation Request Form