

Donation Request Form

Please fill out the following questionnaire to be considered for a donation.

Name of organization		
Name of event		
Date of event		
How many guests do you expect at your event?		
Donation you are seeking		
How you are advertising this event?		
How will you be advertising/displaying our do	onation?	
How much space do you have for donation dis-		
Will you use our recommended display?	Yes	No, I already have a display
Tax ID number		
**Please take a picture of your display table to h	oe featured in	our monthly newsletter.

Please return to:

Holly McGinty, Marketing Manager 1606 Trilogy Parkway Nipomo CA 93444 805-343-9459 ext 104 direct 805-343-0913 fax hmcginty@monarchdunes.com