



Escapades Fundraiser

Donation Form

Item Name	Item #	
Item Type: <input type="checkbox"/> Gift Certificate <input type="checkbox"/> Gift in Kind <input type="checkbox"/> Merchandise <input type="checkbox"/> Raffle <i>If Certificate:</i> <input type="checkbox"/> Included with Form <input type="checkbox"/> Donor will send <input type="checkbox"/> Rotary to generate		
Category: <input type="checkbox"/> Events <input type="checkbox"/> Food/Beverages <input type="checkbox"/> General Items <input type="checkbox"/> Services <input type="checkbox"/> Sporting Events <input type="checkbox"/> Sports Items <input type="checkbox"/> Vacation		
Value: <i>Required</i>	Item <input type="checkbox"/> Received <input type="checkbox"/> Donor will deliver <input type="checkbox"/> Arrange Pick Up	
Item Description		
Item Restrictions		
Donor <input type="checkbox"/> Individual OR <input type="checkbox"/> Household OR <input type="checkbox"/> Business (_____)		
	First Point of Contact	Second Point of Contact
Donor/Contact Name:		
Phone:		
Email:		
Address:		
Website:		
Donor Signature <hr style="border: 0; border-top: 1px solid black;"/> <div style="text-align: right; margin-top: 10px;">Date</div>		
Procured By		