

# Mad River Laser

## DONATION / SPONSOR REQUEST FORM

Today's Date: \_\_\_\_\_

We are happy to receive requests for help with community projects and Sponsorships. Because we get so many requests, and because we have a limited budget, requests are now reviewed in order to determine our ability to participate. Our availability to participate is based on budget and time of year.

All requests must be made in person with 60 days' notice. We ask that you also supply us with a request on the Organization / Company letterhead.

Organization: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Website: \_\_\_\_\_

Email: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Phone for Contact: ( ) \_\_\_\_\_ Email for Contact: ( ) \_\_\_\_\_

Contact Address: \_\_\_\_\_

What are you requesting from Mad River Laser?

---

---

---

---

Date Item is Needed? \_\_\_\_\_ Does the organization have an active account with Mad River Laser? ( ) **YES!** or No ( )

Is this a Profit or Non-Profit Organization? \_\_\_\_\_

Tax Exempt Number: \_\_\_\_\_ Social Security Number \_\_\_\_\_

How will specific mention be made of Mad River Laser's support? \_\_\_\_\_

---

---

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_