

BATTLE ON BAGO

Donation Request Form

Organization Name: _____

Address of Organization: _____

Name of Event (if applicable): _____

Date of Event: _____

\$ Amount Requested: _____

Is this an annual Event? **YES** **NO**

Has Battle on Bago given to your organization or event in the past? **YES** **NO**

Has your organization sold our event/raffle tickets? **YES** **NO**

If not, would you like to be involved in selling tickets? **YES** **NO**

Description of Event and Organization:

How does this event/organization positively influence kids and/or conservation?

May Battle on Bago share pictures of the event or check presentations? **YES** **NO**

Requesting Contact Information (must be filled out entirely)

Name: _____

Phone Number: _____ E-Mail: _____

Address: _____ City: _____ State: _____

Signature: _____ Date: _____