



# DONATION APPLICATION

Name of Organization: \_\_\_\_\_

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

Contact: \_\_\_\_\_ Contact #: \_\_\_\_\_

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

Date of Request: \_\_\_\_\_ Donation Requested: \_\_\_\_\_

How did you hear about SCI Lake Superior Chapter? \_\_\_\_\_

Is this a non-profit organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

Explain what services your organization provides: \_\_\_\_\_

Please provide a brief explanation of what the donation will be used for: \_\_\_\_\_

Please attach any literature or pamphlet you may have on your organization.

\*\* For donations exceeding \$500.00 SCI-Lake Superior Chapter requires Sponsorship acknowledgment displayed at your event or organization.

Send completed form to: Lake Superior Chapter – SCI – PO Box 187; Danbury, WI 54830

Email: [jdums@proishunting.com](mailto:jdums@proishunting.com) -Secretary Jennifer Dums Questions?: President Burl Johnson 715-821-1000

## SCI LSC USE ONLY

Donation Approved? \_\_\_\_\_

Date Approved: \_\_\_\_\_

Amount Approved: \_\_\_\_\_

Approved By: \_\_\_\_\_

