

DONATION REQUEST FORM

Thank you for reaching out to HRCU to help with your community event or serving your organization's mission. Each year, HRCU allocates funds to support community activities through our contributions and resources. For each request, we must fairly distribute our support to as many organizations as possible and ask that you complete this form.

Please fill out this form at least 30 days prior to the event date to give us time to process your request. Completed forms and supporting documents can be sent to marketing@hrcu.org. Thank you and best of luck!

ORGANIZATION/REQUESTOR'S INFORMATION

Name of Organization _____

Website _____

Address _____

Your Name _____ Your Title _____

Phone _____ Email _____

ABOUT YOUR ORGANIZATION

What is the mission of your organization?

Does your organization have 501(c)(3) status? _____

Can you provide your EIN or Tax ID #? _____

Has the organization received a donation from us in the past? If so, when? _____

DONATION INFORMATION

How will the donation be utilized?

Will specific mention be made of our support? _____

Date Donation is Required _____ Date of Event _____