



# DONATION REQUEST FORM

**Completion of this form serves only as a request and does not guarantee a donation  
Please submit requests at least 4-6 weeks prior to the event**

## EVENT INFORMATION:

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

Description of Organization: \_\_\_\_\_  
\_\_\_\_\_

Website (*if any*): \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Description (*i.e. auction*): \_\_\_\_\_  
\_\_\_\_\_

Event Date & Times: \_\_\_\_\_

Closing Date for Event Program: \_\_\_\_\_

Expected Event Attendance: \_\_\_\_\_

Primary Event Sponsors: \_\_\_\_\_

## CONTACT INFORMATION:

Contact Name & Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

*Please return completed form to:*

**MAINE RED CLAWS  
Attn: Community Relations  
413 Congress Street  
Portland, ME 04101  
Fax: 207-210-6659**

**NOTE: Please be sure to include a letter on your organization and event's letterhead with your completed request form. Charitable donation requests must be received by fax or mail; no email or phone call requests, please.**