

Community Giving General Donation Application



Type of Donation Requested

Date _____

Gift Card
Door Prize
Food Platter
Other

Till Donations
Giving Tree Donations
Community Donation Day
Gift Card Fundraising program

Organization Name _____

Mailing Address _____

Phone _____

Email _____

Contact Person Name _____

Phone _____

Email _____

Event Name/Project Title _____

Date/Time Frame _____

Details of this Project or Event (including benefit to the Community)

Have you ever received a donation from the Kootenay Co-op? Yes No

If yes, please describe: _____

Are you being funded for this project from other sources? _____

If yes, from where? _____

Signature _____



Kootenay Country Store Co-op

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