



Individual Requesting Donation			
*First Name		*Last Name	
*email			
*Telephone		Cell Phone	
*Mailing Address			
*Status	Who is the requestor?		
	<input type="checkbox"/> Tri-Cities Sunrise Rotary Club Member?		
	<input type="checkbox"/> Other Rotary Club Member? Club Name:		
	<input type="checkbox"/> Donation Recipient?		
	<input type="checkbox"/> Community Member? Community Name:		
	<input type="checkbox"/> Other?		
	What is your relationship to the donation recipient?		
Recipient Information			

1. For Whom is the donation request? *

- A high school or college student
- A 501 C(3) nonprofit organization
- A citizen in our local community
- A group or community based organization
- Other Describe: [Click or tap here to enter text.](#)

2. What is the mission of your organization, group, or the individual applying?*

How will the Donation be Used?

1. What is the name, project or type of event for which the donation will be used?*

2. What is the goal of the event or purpose for the donation?*

3. What is the desired amount of funds you are requesting?*

4. If applicable, what is the date by which the donation is required?*

Please allow at least 30 days for a decision to be made by our Trustees and Board of Directors.

5. For what purpose will the donation be used? (be specific)*

6. Have you previously received a donation from the Tri-Cities Sunrise Rotary Club?

Yes No If yes, When? [Click or tap here to enter text.](#)

What was the purpose or use of the previous donation?

8. If your donation request is approved, where should the funds be distributed?*

Payee Name:

Payee Address:

Payee Telephone:

Special Directions:

9. The Tri-Cities Sunrise Rotary Club is committed to strengthening the health, social, cultural and education fabric of our communities. Each member is committed to the Rotary philosophy of "Service Above Self." With this in mind, please provide us with a summary of how this donation (if approved) fits into our philosophy.*

10. Would a member of your organization be willing to offer a short presentation to our Club during a regular Club meeting (scheduled on Fridays at 07:00)?

Yes

No

11. Would members of your organization be willing to volunteer during one of our community benefit or fundraising activities (See3Slam, Water Follies, Duck Race, etc.)?

Yes

No

The Tri-Cities Sunrise Rotary Club would like to thank you for completing this donation request form. A member of the Trustees or Board of Directors will be contacting you soon regarding this request.

To submit the request, please mail the completed form to:

Trustees Donation Request
Tri-Cities Sunrise Rotary Club
PO Box 2652
Pasco, WA 99302-2652

Submit electronically by hitting the submit button or saving this form and emailing it to:

christyleerasmussen@gmail.com