

*\*Please complete the following donation request form. Print to a "PDF printer" to save. You may return the form for consideration to [donations@pagosahotspings.com](mailto:donations@pagosahotspings.com).  
-Thank you*

## Donation Request Form

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

Date of Event: \_\_\_\_\_ Requestor Name: \_\_\_\_\_

Requestor e-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

Is your organization tax exempt:  Yes  No Type:  Charity  Non Profit

Tax Exempt Number: \_\_\_\_\_

Event or Specific Purpose of request: \_\_\_\_\_

What type of event are you hosting:  Live Auction  Silent Auction  Prize Drawing

Other (please explain) \_\_\_\_\_

What item are you requesting?: \_\_\_\_\_

How many years have you been holding the event?: \_\_\_\_\_

What has your past attendance been for prior years?: \_\_\_\_\_

What is the event's goal?: \_\_\_\_\_

What is the attendee demographic for your event?: \_\_\_\_\_

How will the money/gift be used?: \_\_\_\_\_

How much of each dollar goes to administration purposes and how much goes to the charity?: \_\_\_\_\_

What is the area you are serving?: \_\_\_\_\_

Are there any matching funds?: \_\_\_\_\_

What is your relationship with The Springs Resort and Spa?: \_\_\_\_\_

Any Special information for your event: \_\_\_\_\_