



DONATION FORM

YOUR INFORMATION

FIRST & LAST NAME _____

ADDRESS _____

CITY/STATE _____ ZIP _____

PHONE _____

EMAIL _____

WEBSITE _____

☐ Yes ☐ No **SUBSCRIBE TO OUR NEWSLETTER**

☐ Yes ☐ No **CONTACT ME ABOUT FUTURE DONATION OPPORTUNITIES**

ABOUT YOUR CONTRIBUTION

MY DONATION IS: ☐ A CHECK ☐ CASH IN A SEALED ENVELOPE

AMOUNT: _____

DATE: ____ / ____ / ____

DONATION TYPE: ☐ FIREWORKS FUND ☐ HARVEST MOON
☐ 4TH OF JULY ☐ GENERAL FUND

NOTE: CHECKS ARE PREFERRED BUT CASH IS
ACCEPTED IN A SEALED ENVELOPE MAILED TO:

**THE SHERIDAN EVENTS COMMITTEE
ATTN: DUDLEY DUNLAVEY
P.O BOX 2
SHERIDAN, IN
46069**

SHERIDAN EVENTS APPRECIATES YOUR CONTRIBUTION!