

**STETTLER COMMUNITY ORCHARD – DONATION FORM**

**BUSINESS / GROUP / INDIVIDUAL NAME\*:**

\_\_\_\_\_

\*Name for donation receipt

\_\_\_\_\_

\*Name for recognition signage if different than above

**Primary Contact:** \_\_\_\_\_

**Mailing Address:**

\_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone (home):** \_\_\_\_\_ - \_\_\_\_\_ **(work):** \_\_\_\_\_ - \_\_\_\_\_

**(cell):** \_\_\_\_\_ - \_\_\_\_\_

**Signature of Applicant(s):** \_\_\_\_\_

**DONATION AMOUNT:** \_\_\_\_\_

**CASH/CHECK:** [  ]

**IN KIND/MATERIALS:** [  ]

**Check #** \_\_\_\_\_

**Paid:** YES NO

**Date Received:** \_\_\_\_\_

**\*\*\*Please Make Checks Payable to "Town of Stettler"\*\*\***