Lakeshore

Donation Application Form

Lakeshore Co-operative
Donation Request Form

Applicant Information:

- **Name of Organization:** _____
- **Contact Person:** _____
- **Phone Number:** _____
- **Email Address:** _____
- **Membership Number:** _____ **(required for all applicants)** **Verified** ☐

Event Details:

- **Event Name:** _____
- **Event Date:** _____
- **Event Location:** _____
- **Expected Attendance:** _____

Request Details:

- **Type of Support Requested (Product, Gift Cards, Equipment Use):** _____
- **Requested Amount/Value: $**_____
- **Detailed Description of the Event/Activity:**

- **Objective of the Event/Activity:**

- **Expected Community Impact:**

Supporting Documents:

- **Attach detailed event plan and budget.**

Acknowledgment:

- **I confirm that the information provided is accurate and that any donation received will be acknowledged publicly in accordance with the Co-op's policy.**

- **Signature: _____**

- **Date: _____**