



Cascade Eye & Skin Centers Donation Request

Donation requests must be submitted a minimum of 60 days prior to the scheduled event date.

Date of Request _____

Organization Information:

Name of Organization _____ Federal Tax Id# _____

Contact Name _____ Title _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Fundraiser Information:

Event Date _____ Event Location _____

Event Name/Description _____

Estimated Number of Event Guests _____

How will the donation be used? Silent Auction Live Auction Raffle Door Prize
 Other _____

How will Cascade Eye & Skin Centers be recognized for providing fundraising support?

Has your organization requested community support from Cascade Eye & Skin Centers in the past? If yes, please provide details _____

This completed form along with pertinent organization/event collateral must be emailed to **donations@cascadeeyeskin.com** a minimum of 60 days prior to the scheduled event date in order to be considered. A Cascade Eye & Skin Centers representative will email the above listed email address with a response approximately 60 days prior to the provided event date.