

APPLICATION FOR DONATION

MUST BE SUBMITTED 30 DAYS IN ADVANCE

As a small rental business, we receive donation requests weekly. Due to the large number of requests received each year, we have decided that it would be more beneficial to be a small part of many events rather than a large part of only a few. The max donation given will be 10% discount off your rental items. We ask that all request are turned in and approved 30 days prior to the event date.

Date:				
Name of Organization:				
Address:	City:	County:	State:	_Zip:
Organization Phone Nu	ımber:			
Contact Person:		Phone:	Email:	
THE EVENT				
Name of Event:				
Event Date(s):		Time:	Est. # of Attendees:	
Location:				
Address:	City:	County:	State:	Zip:
Annual Event?		_ Since what year?		
Type of Event:				
How does this event be	nefit your con	nmunity?		
How do you intend to r	oromote the ev	ent?		

event perfection.

GENERAL INFORMATION

THE DONATION (10% DISCOUNT)

Type the equi	pment needed and o	quantities requestin	g:	
Tables:	Chairs:	Linens:	Tents:	Staging:
Other:				
Do you have a	ı key/major particip	ating sponsor?	_ If yes, who?	
Has the organ	nization previously r	equested donation/	discount from Crea	te A Scene Events?
Date of last re	equest?	_ Was the request gr	eanted? If yes,	what amount?
YOUR ORGA	NIZATION			
Is the organiz	ation Tax Exempt u	nder IRS Code Secti	on 501(c)3?	
Please enclo Status	ose a copy of your	organization's II	RS letter stating t	the Tax Exempt 501
Tax Exempt N	Number:			
Legal Name o	f Organization:			
What rental c	ompany(s) does the	organization currer	ntly use?	
What is the m	nission, or purpose,	of the organization?		
Signature o	f Applicant:			Date:
Print Name	of Applicant:			

CREATE A SCENE EVENTS

632 Harding Rd Morton, IL 61550 (309) 745-5440 hello@createasceneevents.com