

FUNDRAISER RESERVATION FORM

COPY TO: Customer, Office, Manager

Today's Date: _____

Location: _____

Manager: _____ Phone: _____

Please Print CLEARLY!

Organization: _____

Contact: _____ Phone: _____

Mailing Address: _____

Town: _____ Zip: _____ EMAIL: _____
(This allows us to email the flier to you)

Non-Profit # _____

Date of Fundraiser: _____

Time of Fundraiser: From _____ to _____

Authorization: _____ Date: _____

Flier Mailed or Emailed: _____ (Date)