

Donation Request Form

<i>Organization Information</i>		
Organization Name:		
Address (donation will be mailed to this address):		
Phone:		
Website:		
Mission:		
Whom does your organization benefit?	<input type="checkbox"/> Children/Families <input type="checkbox"/> Plants/Environment <input type="checkbox"/> Animals <input type="checkbox"/> Education <input type="checkbox"/> Other _____	Tax ID Number:
<i>Contact Information</i>		
Name:		
Phone:		
Email:		
Relationship to Organization (staff, volunteer, etc.):		
<i>Event Information</i>		
Name of Event:		
How will the donation be used? (silent auction, raffle, door prize, etc.):		
Event Description (can attach event flyer, if desired):		
Date of Event:		Expected Number of People to Attend: _____
<i>Additional Information</i>		
Has Norfolk Botanical Garden donated to your organization in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No	Would you like to be added to our email list to receive information about upcoming Events? <input type="checkbox"/> Yes <i>Email address:</i> _____ <input type="checkbox"/> No	
How will Norfolk Botanical Garden be recognized for this donation?		
How did you hear about Norfolk Botanical Garden?		

Return request form to the **Development Coordinator** at:
 Norfolk Botanical Garden, 6700 Azalea Garden Rd., Norfolk, VA 23518