



sensorio

DONATION REQUEST FORM

4380 Highway 46 East, Paso Robles CA 93446

805-226-4287

info@sensoriopaso.com

To request a donation, please mail or scan in the following items to Sensorio at the above address ATTN: Donation Request.

Please Include this completed form AND a formal written request on your organization's letterhead. Donation Requests must be submitted at least 3 weeks prior to your event.

Organization: _____

Type of Organization (check/circle)

Business

Non-Profit Group

Church

Civic

School

Other: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Phone: _____

Email: _____ Fax: _____

Event Details

Name/Type of Event: _____

Event Date: _____

Event Location/

Description: _____

Completion of this form is a request only and does not guarantee a donation.

Approval Initials: (Executive Director) _____