



# AQUARIUM OF BOISE

EDUCATION • INSPIRATION • CONSERVATION

## Donation Request Form

Please return form to the Aquarium of Boise Front Desk

### Event Contact Details

Event Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Role in Event: \_\_\_\_\_

### Organization Details

Organization name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Email: \_\_\_\_\_

### Organization Type:

501c3 \_\_\_\_\_ School \_\_\_\_\_ Corporation \_\_\_\_\_ Church/Faith-based \_\_\_\_\_ Hospital \_\_\_\_\_

Community Group \_\_\_\_\_ Other: \_\_\_\_\_

Organization purpose or cause: \_\_\_\_\_

Organization EIN (Tax ID): \_\_\_\_\_

Organization Contact: \_\_\_\_\_

### Event Details

Date of Event: \_\_\_\_\_ Type Event: \_\_\_\_\_

Purpose of event: \_\_\_\_\_

Number of people expected to attend: \_\_\_\_\_

How will the aquarium passes be used at the event?

Auction item \_\_\_\_\_ Raffle item/Door prize \_\_\_\_\_ Contest prize \_\_\_\_\_ Participation gift \_\_\_\_\_

Other: \_\_\_\_\_ Opportunities to market Aquarium of Boise at the Event: \_\_\_\_\_

### OFFICE USE ONLY

Date Request Received: \_\_\_\_\_ Pass Tracking Number: \_\_\_\_\_

Aquarium Signoff: \_\_\_\_\_ Signoff Date: \_\_\_\_\_

Request Status: Approved \_\_\_\_\_ Denied \_\_\_\_\_ Pass Picked up \_\_\_\_\_

Item Donated: 2 passes/feeding token Other: \_\_\_\_\_