

MOONLIGHT



BASIN

Donor Request Form

Please Note: Please allow at least 2 weeks for review. Donation requests are reviewed on a weekly basis.

If possible, please send an organization packet and any event material.

Email your donation request to donations@moonlightbasin.com or mail to

Moonlight Basin, P.O. Box 160040, Big Sky, MT 59716.

Organization Name	
Contact Name	
Address	
City, State, Zip Code	
Telephone	
Telephone (secondary)	
Fax	
E-Mail	
Call Received (Date)	
Type of Donation Requested	Cash{ } Moonlight Basin ski passes{ } Moonlight Basin Lodging { } Spa Treatments{ } Either{ }
Amount/Details (note suggested/change to final)	
Moonlight Basin employee contacted	
Donation Deadline	
Explanation of Cause/Need	
Moonlight Basin is committed to supporting organization and programs that support our Vision, Mission and Values. Check what area(s) apply.	<input type="checkbox"/> Environmental Stewardship <input type="checkbox"/> Montana Hospitality <input type="checkbox"/> Community Enrichment <input type="checkbox"/> Local Children Program <input type="checkbox"/> Education <input type="checkbox"/> Emergency Service <input type="checkbox"/> Recreation <input type="checkbox"/> Arts & Humanities

How will our donation be used to support one of these areas?	
History of Moonlight's Involvement with this Organization	
What is the Sponsor Package?	
How can Moonlight Basin be represented by this charity or event? (booth, staff, etc)	
Will marketing collateral be needed? (Flyers, Brochures, etc)	
Describe the audience attending this event?	
Comments from person requesting the donation:	