



Kiwanis Club of Burley

P. O. Box 581 – Burley, Idaho – 83318

Donation Request Application

Organization

Name of Individual/Organization: _____

Contact Name: _____ Title: _____

Address: _____

Phone: _____ Email: _____

People in Organization: _____

Donation

Donation requested: _____ # People Served by project: _____

Date of Request: _____

Briefly describe the organization, purpose of the donation request, and expected outcome of the project:

Will Kiwanis receive any acknowledgement (signage, advertisement, etc)? _____

** A completed application is necessary to consider your donation request. Thirty (30) days' notice must be given for all requests. Please understand that the Kiwanis Club of Burley cannot accommodate every request due to budget restrictions. Donations will be approved by the Board of Directors with specific emphasis on: organizations/projects that benefit children, especially those considered at-risk or vulnerable; programs that benefit many children more than individuals; programs targeted to service club community projects; and support to sponsored youth partner organizations such as Key Club, K-Kids, etc.

Donations for your organization may be provided based upon the Burley Kiwanis Club's request for your participation in a club weekly meeting (Wednesdays) to outline the results of your project identified in the application or hands-on support with one of our sponsored community service projects.

For Kiwanis Use Only

() Approved () Cash \$ _____

() Other: _____
() Sorry, we will not be able to donate at this time. We wish you good luck on your project.

Signed: _____ Date: _____