



GRRMF Donation Sponsorship Form

Please print legibly or type

Date: _____

Name of Donor (for recognition & acknowledgment)

Recognition Details (name of company or organization to be recognized, if different from above):

Address: _____

Telephone: _____ E-mail: _____

Contact Person: _____

Description of donated item(s):

Gift Card: Value \$ _____

Gift Certificate: Value \$ _____

Admission ticket: Value \$ _____

**Please email donation certificate and form to info@grrmf.org or mail donation and form to GRRMF
P.O. Box 1449 Goldenrod, FL 32733**

Questions? Email info@grrmf.org Thank you!

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLLFREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. # CH11185