

Please read the following, to determine eligibility, before submitting your application.

Donation Request Policy:

All requesting organizations must complete the Donation Request Application a minimum of four weeks prior to your event. Requestor must be a representative of an organization legally incorporated as a not-for-profit organization with the IRS with 501 (c) 3 status with a state, local, tribal or government agency. An organization may be granted a donation more than one time, however the Schauer Center's season runs September through June and only one request will be considered per season. The Schauer Arts and Activities Center retains the right to deny requests to any organization not meeting these requirements.

If you are requesting a donation near the end of our season, we may no longer have tickets available, and may need to hold your request until tickets for the next season become available. If the date of your fundraiser is prior to the announcement of our next season, it may be necessary to deny requests through no fault of the requestor, due to a lack of available tickets and/or gift certificates. **Filling out the application does not guarantee that the Schauer will be able to fulfill your request.**

Only donation requests for tickets, gift certificates or other promotional materials will be considered. Monetary requests will not be fulfilled.

The application may be submitted electronically to sandy@schauercenter.org, or you may print a hard copy and mail or fax to the Schauer Arts and Activities Center.

Fax No: 262-670-0937

Mailing Address: 147 N Rural St, Hartford, WI 53027

Email to: info@schauercenter.org

Donation Request Application

(Filling out this form does not guarantee you will receive a donation....donations granted pending availability)

Name of your Organization: _____

Address: _____ City/Zip _____

State Tax-Exempt ID # or FEIN : _____

Title of Event: _____

Purpose of this Event: _____

Event Date: _____ Location: _____

How many people do you expect will be attending this event? _____

How will you be promoting your event? _____

Contact Name: _____ Phone: _____

Contact E-Mail (Required): _____

Name of person who will be picking up donation: _____

(Sorry, due to the high number of requests we receive & to maintain costs, we do not mail donations. If you'd like your donation mailed, please include a S.A.S.E. - minimum dimensions, 7" x 10" with \$1.61 postage affixed.)

Date You Would Like to Pick-Up Donation: _____

Is this an annual event? Yes No

How will you use this donation? Raffle Prize Silent Auction Part of Gift Basket
Other (please specify) _____

Demographic of attendees: Families Single Adult Businesses Children
Other (please specify) _____

-----*Please Do Not Write Below This Line*-----

<input type="checkbox"/> Approved		<input type="checkbox"/> Declined
Item Donated: _____		Reason: _____
Value: _____		_____