



## **DONATION REQUEST**

**Today's Date**

**Date of the Event**

**Date Donation Needed**

**Name of the Event**

**Name of the organization**

**Describe your organization**

**Contact**

**Address**

**Phone**

**Fax**

**Email**

**Describe the event (How many people will attend, what is the cause?)**

**Please mail or fax your application to:**

**Becky Smith  
The Kalamazoo Wings Hockey Club  
Wings Stadium  
3620 Vanrick  
Kalamazoo, MI 49001  
Fax: 269-345-6584**

**Please call or email Becky Smith with questions at 349-9772, ext 262**

**[bsmith@kwings.com](mailto:bsmith@kwings.com)**

