



# 2018 BOOSTER BASH DONATION AGREEMENT

DONOR NAME _____	BUSINESS PHONE _____
COMPANY _____	CELL PHONE _____
ADDRESS _____	FAX _____
CITY _____	BOOSTER REP _____
STATE/ZIP _____	DATE _____

ALLOCATION OF PROCEEDS TO TEAMS		* Indicate % of proceeds to go to each team. Limit three teams.			
	%*		%*		%*
BASEBALL		GOLF - GIRLS		TENNIS - GIRLS	
BASKETBALL - BOYS		LACROSSE - BOYS		TRACK & FIELD	
BASKETBALL - GIRLS		LACROSSE - GIRLS		VOLLEYBALL - BOYS	
CHEER - SIDELINE		SOCCER - BOYS		VOLLEYBALL - GIRLS	
CHEER - SPORT		SOCCER - GIRLS		WATER POLO - BOYS	
CROSS COUNTRY		SOFTBALL		WATER POLO - GIRLS	
FOOTBALL		SWIMMING & DIVING		WRESTLING	
GOLF - BOYS		TENNIS - BOYS		GENERAL FUND	

DONATION(S) PLEDGED*		* The undersigned agrees to donate the following ....	
	AMOUNT/PRICE/ VALUE	DELIVERED	
CASH		<input type="radio"/> YES	
PRODUCT		<input type="radio"/> YES	
SERVICE		<input type="radio"/> YES	

DESCRIPTION OF PRODUCT/SERVICE: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

RESTRICTIONS/EXPIRATIONS/SPECIAL INSTRUCTIONS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

AUTHORIZED DONOR SIGNATURE: \_\_\_\_\_

**Please scan and email this to Christy LoCastro at [Christina.LoCastro@AssetMark.com](mailto:Christina.LoCastro@AssetMark.com) or mail to:  
 Acalanes Boosters Club, 1200 Pleasant Hill Road, Lafayette, CA 94549.**

Thank you for your generous support of Acalanes student athletes. A copy of this form serves as your tax receipt.

The Acalanes Boosters Club is a 501(c)3 organization. Tax ID# 23-7428299.