

Date: _____

Application for *Gift Card* Fund-Raiser

Return to: Dixboro General Store, 5206 Plymouth Rd, Ann Arbor MI 48105 - or Fax to: (734) 994-1359

Name of Non-Profit organization: _____

Address: _____

Phone: _____ Tax Id #: _____

Name of person applying: _____

Phone: (Day) _____ (Evening) _____

How long has this group been established? _____

Description of group:

Approximate number of members: _____ Approximate yearly budget (if known): _____

How often does your group meet? _____

Do you have a website? (If so, please list) _____

Do you issue newsletters? (How often?) _____ Do you have an E-mail network? _____

How many \$25 gift cards do you hope to sell? _____

Is there a particular goal for the money raised?

What other fund raisers do you do?