



DONATION FORM:

Name of Donor _____

Do you wish to be recognized (only first and last name will be used)? Yes No

Street Address _____

City _____ State ____ Zip _____

Do you require a receipt for tax purposes? Yes No

Designation for your donation/Cost of programs

\$30 2 Youth Program Participants (youth soccer, first tee golf, flag football, etc)

\$50 Art Supplies for RIFAC Pre-School

\$150 5 Youth Program Participants

\$225 Send 1 child to summer camp

\$500 Small amenities in city parks

\$1000 1 Expression Swing

\$2500 New Signage for a Park

Other. Please specify _____

No Designation