



Send completed form to:

bluefusion entertainment center

1340 Mt. Vernon Ave.

Marion, Ohio

Donation Request Form

This form must be filled out in its entirety in order to be accepted

Date of Request: _____

Organization Name: _____

Contact Name: _____

Address: _____

City, State, Zip _____

Phone: _____ E-Mail Address: _____

Type of Organization: _____

Have you received a donation from us before? _____

Event Name: _____ Event Date: _____ Event Time: _____

Event Purpose: _____

Is This Event a Fundraiser: _____ Who do the Proceeds Benefit? _____

Deadline for Receiving Donation Item (two week minimum): _____

What is the purpose of the request: _____

Donation Notes:

I certify that the information listed above is true and complete to the best of my knowledge. I understand that not all donation requests will be approved. I understand that it may take up to 10 business days for this form to be reviewed. I agree to only use the donated items strictly for the charitable purposes through fundraisers, auctions, giveaways and promotions.

Signature: _____ Date: _____

bluefusion entertainment only

Date Received: _____ Donation: _____ Notes: _____