



IN-KIND DONATION FORM

Thank you for your donation to Rainbow City Performing Arts! Your generous support helps us promote diversity and inclusion through music. Please complete this form for our staff to review and approve your donation.

DONOR DETAILS

Name or Corporation Name:

Contact Name (if corporation):

Name for Recognition (if different):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	City	State	Zip Code

<input type="text"/>	<input type="text"/>
Phone Number	Email Address

DONATION DETAILS

Is this donation related to a specific event or purpose? Yes No

If yes, list the event or purpose: Event Date:

IN-KIND DONATION: GOODS

Description of Item(s): (Please include quantity, brand, model, etc.)

<input type="text"/>	<input type="text"/>	<input type="text"/>
Estimated Fair Market Value	Condition of Item(s) (New, gently used, etc)	Date Given to RCPA

IN-KIND DONATION: SERVICES

Description of Service

Is this a professional service donation? Yes

<input type="text"/>	<input type="text"/>	<input type="text"/>
Hours of Service	Rate	Total Value

SIGNATURE

<input type="text"/>	<input type="text"/>
Donor Signature	Date

Send the completed form to donations@rainbowcity.org