



PLEASE RETURN THIS COMPLETED APPLICATION IN PERSON

DONATION APPLICATION

SKY HIGH SPORTS CHARLOTTE

CONTACT INFORMATION

NAME OF CHARITY: _____
CONTACT NAME: _____
TITLE/ROLE: _____
MAILING ADDRESS: _____

CONTACT PHONE NUMBER: _____
CONTACT EMAIL: _____

WHAT IS THE PRIMARY FOCUS OF YOUR ORGANIZATION?

TELL US ABOUT YOUR EVENT, ACTIVITY, REQUEST:

WHEN WILL THE EVENT BE OCCURRING?

WHEN DID SKY HIGH LAST CONTRIBUTE TO YOUR GROUP?

HOW WILL SKY HIGH SPORTS' DONATION BE RECOGNIZED?

HAVE YOU EVER PARTICIPATED AT SKY HIGH BEFORE? YES _____ NO _____

SKY HIGH SPORTS

601 N POLK STREET, PINEVILLE, NC 28134
TEL: 704-889-5867 FAX: 704-889-0195
CLT.SKYHIGHSPORTS.COM
CLTINFO@SKYHIGHSPORTS.COM

PLEASE NOTE THAT DUE TO THE LARGE NUMBER OF REQUESTS FOR DONATIONS WE RECEIVE, SKY HIGH MUST LIMIT ITS SUPPORT TO THOSE OPPORTUNITIES MOST CONSISTENT WITH THE COMPANY'S GIVING PRIORITIES. FOR MORE INFORMATION, PLEASE VISIT CLT.SKYHIGHSPORTS.COM OR CALL 704-889-5867.