

# SOUTH CAROLINA STINGRAYS DONATION REQUEST FORM

Event Date: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

Organization: \_\_\_\_\_

Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Return Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Federal Non-Profit Tax ID#: \_\_\_\_\_

Date Donation is needed by (this is preference only and cannot be guaranteed): \_\_\_\_\_

Signature of Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Requests can be mailed to:

South Carolina Stingrays  
Community Relations Department  
3300 West Montague Avenue, Suite A-200  
North Charleston, SC 29418

Or faxed to:

(843) 744-2898

*If you have any questions, please contact Randi Brown at (843)744-2248 extension 1208  
or by email at [rbrown@stingrayshockey.com](mailto:rbrown@stingrayshockey.com)*

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*For office use only:*

Date Received: \_\_\_\_\_ Date Sent: \_\_\_\_\_

Donated Item(s): \_\_\_\_\_