



## Donation Request Form

Please fill out completely and follow the return instructions at the bottom of this form.

1. Name of Organization making request
  
2. Mailing address
  
3. Contact person, their telephone number and e-mail contact information
  
4. Purpose of the organization.
  
5. Specific in-kind donation request and amount (**ex. four alpine slide passes**). Donations are not to exceed the value of one adult season pass for the current or upcoming winter season.
  
6. Has the organization received a previous donation from Park City Mountain Resort? If so, what was the donation and when was it received?
  
7. Explanation of the need for in-kind service or product; door prizes, raffle prizes, silent auction, etc.
  
8. Attach copy, state or verify IRS 501 (c) (3) tax exempt status.

*Park City Mountain Resort will respond to every request in writing, within two weeks of the Contribution Committee's determination, stating whether the request has been accepted or rejected, and if accepted, what the donation will be. Please remember that the committee meets only once per month on or immediately after the fifth.*

**Please return to**

Mail: Contribution Committee, Park City Mountain Resort, 1310 Lowell Avenue, Park City, Utah, 84060.

Email: [donations@pcski.com](mailto:donations@pcski.com)

Fax: 435-647-5374 Attn. Contribution Committee