



Donation Request Form
Waterloo Black Hawks Hockey
(Must be turned in 14 Days Prior to Event)

Organizational Information

Organization Name: _____ Contact Person Name: _____

Organization Address: _____

City: _____ State: _____ Zip: _____

Phone Number(s): _____

Email: _____

Website: _____

Event Information

Event Name: _____ Event Date: _____

Event Location: _____ Estimated Attendance: _____

Event Description: _____

Who will benefit from this activity?: _____

What can the Black Hawks provide to best help you reach your goals?: _____

How will you use the requested item?: Live Auction Silent Auction Raffle Other

(Please Explain) _____

Please Attach Event Flyer with Donation Request

Any Questions Please Contact:

Brandon McConnell

Director of Game Night Operations

brandon@waterlooblackhawks.com

Office: (319) 296-7574