



Donation Request Form

Giving back to the community is an important part of our mission. We welcome opportunities to donate to the organizations that serve our community. To be considered, please submit this form at least one month prior to your event. Crossroads Market wishes to fulfill every request, but needs to be diligent in our giving.

Return completed form to Crossroads Market, or email to marketing@crossroadsgl.com

Name of Organization: _____

Date of Request: ____/____/____ Date of Event: ____/____/____

Name/Type of Event: _____

Contact Information:

Name of Contact: _____

Email Address: _____

Phone Number: (____) ____-_____

Monetary Donation Request Amount \$ _____

Non-monetary Donation Request

Items Requested: _____ Date Items are Needed: ____/____/____

(For Office Use Only)

Crossroads' Response:

- Approved
- Denied

Signature: _____

DATE: ____/____/____