

CHIPPEWA FALLS PARKS & RECREATION DEPARTMENT

DONATION FORM

Name of Donator: _____ Amount _____

Donator's Address: _____

Donator's Phone: _____

DONATION: _____

MEMORIAL: _____

In Memory Of: _____

Donation Given for: Christmas Village ___ Irvine Park ___ Casper Park ___ Skateboard Park ___
Other _____

For Office Use Only:

Date Received: _____ Received by: _____ For: _____

Deposited-Acct # _____ Date Entered: _____ Reply Sent: _____

****Please Make Checks Payable to Chippewa Falls Parks and Recreation Dept.**

****For further information calls Parks and Rec (715)723-0051**