

(Please print and complete the following form)

### CONTACT INFORMATION

I would like my donation to be anonymous \_\_\_\_

First Name:\* \_\_\_\_\_

Last Name:\* \_\_\_\_\_

Email:\* \_\_\_\_\_

Primary Phone:\*(\_\_\_\_)\_\_\_\_\_

Address:\* \_\_\_\_\_

Address 2: \_\_\_\_\_

City:\* \_\_\_\_\_

State / Province:\* \_\_\_\_\_

Zip / Postal Code:\* \_\_\_\_\_

Business or Sponsor Name to be Listed: \_\_\_\_\_

**Upload Logo if Applicable to randyf78@gmail.com**

### DONATION INFORMATION

Please enter the amount that you would like to donate below.

Please Select a Donation Amount:\*

\_\_\_\_ \$50.00

\_\_\_\_ \$100.00

\_\_\_\_ \$500.00

**Donors contributing \$500 or more will be recognized on the Wall of Donors at the new complex)**

Other Amount: \$ \_\_\_\_\_

### Mailing Information

Please make your check payable to: **Columbus Soccer Organization**

Please mail your tax-deductible donation to:

Columbus Soccer Organization  
413 4 th Ave. S.  
Suite #4  
Columbus, MS 39701