

Hawthorne Scholastic Academy  
Imagine Spring Fundraiser  
Friday, March 16, 2012  
Any questions, please call (773) 534-5550

**AUCTION DONATION and DONOR INFORMATION**

**PLEASE PRINT.** Write donor name exactly as it should appear in the Auction Listing.

DONOR NAME(S): \_\_\_\_\_

HAWTHORNE PARENT?            YES            NO

CONTACT PERSON:

(For further information)

ADDRESS/CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

LIST AS ANONYMOUS?            YES            NO

VALUE OF DONATION: \$

DESCRIPTION OF DONATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RESTRICTIONS OR INSTRUCTIONS:

(expiration date, exclusions, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DONATIONS MUST BE RECEIVED BY FEBRUARY 15, 2012**

**PLEASE CHECK IF YOU WOULD LIKE AN INVITATION TO THE EVENT**

**CHECK ONE:**

DONATION ATTACHED

WILL MAIL SEPARATELY

PLEASE PICK UP ON \_\_\_\_\_ (date)

**SOLICITOR INFORMATION:** thank you for soliciting this donation/ad and completing this form.

SOLICITOR NAME: \_\_\_\_\_ CHILD'S NAME: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ ROOM NUMBER: \_\_\_\_\_