

Adding Life to Years Gala

Celebrating Our Purpose and Passion

Thursday, June 20, 2024



Crown Plaza Hotel, Warwick

THANK YOU FOR YOUR SUPPORT!

Thank you for joining Aldersbridge Communities as an in-kind donor for our annual gala. Your name will be listed in our materials and to serve as tax-deductible information.

DONATED ITEM: _____

ESTIMATED RETAIL VALUE: \$ _____

DONOR INFORMATION:

Name: _____ **Company Name (if applicable):** _____

Street: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Work Phone:** _____

Fax: _____ **Email:** _____

DONOR RECOGNITION: Please specify exactly how the donor should be recognized (e.g., Donated by the XYZ Company; Donated by Mr. and Mrs. Jack Smith).

Item Description: Please provide information about the donated item including all relevant details (e.g. color, size, model, features).

Restrictions & Expiration Information: Please note any restrictions and/or expiration date that apply (e.g., Valid through June 1, 2025; Valid only on weekdays; Valid for a party of up to six people).

Restrictions: _____

Expiration Date: _____

Item Delivery: Please coordinate delivery of the donated item and supporting collateral.

Attached/Enclosed: _____

To be delivered/Date of delivery: _____

Can be picked up by contacting : _____

Half – page advertisement in Community Partner ad book for donated items with a value of \$1,000 or more)

Donor to design and submit ad (Final PDFs must be received by May 23, 2024).

Donor Signature: _____ Date: _____

Mail or email to:

Development Coordinator

Aldersbridge Communities, 40 Irving Avenue, East Providence, RI 02914

email to: dev-assist@aldersbridge.org

