

ROSE JEWELERS



Name of Organization:

Date(s) of the event, time and location:

Tell us a little bit about your event. How will funds be raised? What is the goal? How is the event being promoted? Is there a person or program that benefits from this event?

Type of donation: *(Please indicate a preference)*

- Rose Jewelers Gift Certificate _____
- An item(s) from our store _____

How the item will be used? *(Please circle one)*

Silent Auction Raffle Door Prize Live Auction

Deadline to submit donation: _____

Your name:

Your e-mail:

Your daytime phone number:

- No monetary donations given
- Donations must be picked up from the store.
- Return this form by
Fax: 608-784-3537 or
E-mail: jon@rosejewelerslax.com