

McDonald's Donation/Discount Application

All requests must be submitted at least 14 days in advance of the event.

PLEASE PRINT CLEARLY

Organization Information

Organization Name: _____
Address: _____
City, State, Zip: _____
Phone number: _____

Contact Information

Contact Name: _____ Title: _____
Phone Number: _____ Fax Number: _____
E-mail address: _____

Event Information

Name of Event: _____ Date: _____
Request: _____

What would be an alternative method in which we may help you?

Who is this benefit targeted towards? _____
Number of Participants/Amount Requested: _____
Have you ever received assistance from McDonald's before? Please explain:

If yes, Date(s) previously supported:

If yes, who was the contact for the past event(s)

Applicant Signature

By Signing below, I acknowledge the following:

- > I am an authorized agent of the organization above
- > Items through this request are not available for resale
- > Any products and/or materials granted will be used in the manor in which they are intended, and be used in the support of the event mentioned above.

Signature of Applicant

Date

OFFICIAL USE ONLY

Approved for: _____
Approved By: _____ Date: _____