**Donation Form**

**Diggin It - Music Festival**

Sat September 9th, 2017

Columbia County Amphitheatre

In Support of ACS Volleyball Booster Club, building Christian leaders & student-athletes.

**Donor Information** {please print or type}

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

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

**City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Pledge information**

I [we] plan to make the following contribution in the form of [ ] **Cash**, [ ] **Check**, [ ] **Raffle Item**

**Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Raffle Item description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Acknowledgement Information**

**Please use the following name{s} in all acknowledgements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**[ ] I [we] wish to have our gift remain anonymous**

Please make all checks payable to: Brenda Arbogast

Address: ACS Volleyball Booster Club

c/o Brenda Arbogast

313 Baston Road

Martinez, Ga 30907

Phone: 706-941-1380