

# 4-A-Child Masquerade Ball

"It only takes a minute to make a difference in the life of a child"



## WINE & BEER DONATION FORM

### CONTACT INFORMATION

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Donor Name: \_\_\_\_\_

Contact Name (If donor is a company): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Does your company have a Facebook page? \_\_\_\_\_ If so, what is the profile name? \_\_\_\_\_

### WINE/BEER DONATED

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Complete Description of wine/beer: \_\_\_\_\_

\_\_\_\_\_

# of cases or bottles : \_\_\_\_\_

\_\_\_\_\_

#### Please check one of the following:

\_\_\_\_\_ Will be dropped off at CPI

\_\_\_\_\_ Will be picked up by a CPI representative (please provide details on when and where to pick up)

\_\_\_\_\_

#### Interested in helping out in other ways? Please check below.

\_\_\_\_\_ I am interested in purchasing tickets to the event

\_\_\_\_\_ I am interested in learning about sponsorship opportunities.

*CPI will obtain an ABC day license for this event. Proof of ABC license can be emailed to you 15 days before event or a copy can be presented at pick up.*

#### PLEASE RETURN THIS FORM BY July 8, 2016 TO:

Child Parent Institute, Attn: 4-a-Child Event

3650 Standish Avenue, Santa Rosa, CA 95407

Phone (707) 585-6108 Fax (707) 585-6155

[tiffanim@calparents.com](mailto:tiffanim@calparents.com)

Tax Id Number: 94-2541640



child parent institute