

5TH ANNUAL



CHS BULLDOG CLASSIC

DONATION INFORMATION

Name: _____

Phone#: _____ Email: _____

Address: _____

City/State/Zip: _____

Cash Donation \$ _____

For Item donations complete the following description:

Item Name: _____ Estimated Value: \$ _____

Donation: _____ is enclosed

OR _____ can be picked up (Day/date/time) _____

For questions or item pickup please email jhannam@cedarburg.k12.wi.us

or joneil@cedarburg.k12.wi.us

Donations can be dropped off or mailed to:

Cedarburg Athletic Department,

W68N611 Evergreen Blvd., WI 53012



Make Checks Payable to: Cedarburg Booster Club

Please include this completed form.

Thank You for your support!!!