



APPLICATION FOR DONATION/DISCOUNT

Peru Farm Center takes great pride in supporting the communities we serve. Please find attached Peru Farm Centers' donation/discount application. All applications must be submitted a minimum of eight weeks prior to your event date to be properly reviewed and appear on our agenda. We understand your commitment and dedication to your organization and in order to give your request the in-depth review that it deserves, we must require this lead-time for adequate study. The Donation Committee will consider your application and you will receive a written decision within four weeks of being submitted.

Our donation/discount request form is brief and specific; please fill it out completely so that the pertinent information we need is readily available. Please include any literature that you may want us to review and/or a brief cover letter highlighting your intentions and/or goals. Please print or type the application. Be sure to sign the application at the bottom. Since contributions/discounts cannot be guaranteed from year to year, organizations must resubmit the application with each new request. Due to the high volume of requests that we receive, this procedure is the most expedient way for you to present your request and have it properly reviewed. This program is part of our yearly marketing and advertising budget. As such, we have reasonable expectations that any approved donations will afford us opportunities to develop future business with either attendees or supporters of your event. Any assurances that you can provide this opportunity to us will enhance our consideration of your request. Please email, fax, or mail your completed application to the address below. Verbal request applicants will not be considered.

If you need assistance in completing this form, please call (518) 643-2312

Donation/Discount Request
F. (518) 643-0256
E. info@perufarmcenterny.com

2682 State Route 22: Peru, NY 12972
Ph: 518-643-2312
www.perufarmcenterny.com



Donation/Discount Form

GENERAL INFORMATION

Date _____
Name of Organization _____
Address _____
City _____ County _____ State _____ Zip _____
Organization Phone Number _____
Contact Person _____ Phone _____

THE EVENT

Name of Event _____
Date(s) _____ Time _____ Est. # of Attendees _____
Location _____
Annual Event? _____
Since What Year? _____
Type of Event (i.e. dinner, festival, fun run) _____
How does this Event benefit our community? _____
How do you intend to promote the Event? _____

THE DONATION

What type of donation/discount is requested? Donation of equipment? _____ Or Discount? _____

Type of equipment needed and quantities requesting?

Equipment _____ Other _____

Please list items _____

Will Peru Farm Center be promoted with the Event if a donation or discount is provided?

_____ If yes, in what manner? _____

Is camera ready artwork needed? _____ If yes, by what date? _____

In exchange for any approved donation or discount, would your organization be willing to do any of the following:

_____ Provide Peru Farm Center a sponsorship equal to the value of the donation

_____ Provide Peru Farm Center a table or attendee tickets equal to the value of the donation

_____ Provide Peru Farm Center the attendee list with contact information

_____ Recognize Peru Farm Center from the podium during your event

_____ Peru Farm Center is permitted to publish a press release recognizing our support of your event, after approval from your organization.

_____ Peru Farm Center is permitted to mention and/or showcase pictures about the event/sponsorship in their marketing materials, after approval from your organization

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NOTE: Peru Farm Center requests for a copy of all final marketing collateral used in the promotion of the event.

Do you have a major or presenting sponsor? _____ If yes, who? _____

Please list up to 3 other sponsors, and type or amount of their donation/discount:

1. _____ \$ _____
2. _____ \$ _____
3. _____ \$ _____

Has the organization previously requested a donation/discount from Peru Farm Center? _____

Date of last request? _____ Was the request granted? _____ If yes, what amount? _____

YOUR ORGANIZATION

Is the organization Tax Exempt under IRS Code Section 501(c)3? _____

IF SO, PLEASE ENCLOSE A COPY OF YOUR ORGANIZATION'S IRS LETTER STATING THE TAX EXEMPT 501 STATUS

Non-profit Taxpayer's ID Number _____ Legal Name of Organization _____

What is the mission statement, or purpose, of the organization? _____

Does the organization primarily serve a particular ethnic, religious, or age group; or any other group with a "common bond" (i.e. families with preschool children, etc.)? If so, what group(s)?

What percentage of each of the following groups does the organization serve?

% low-income _____ % moderate-income _____ % middle & upper income families _____

Signature of Applicant _____ Date _____

Print Name of Applicant _____

Send to:

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