Donation Request Form

Date: _____

Contact Name: _____

Organization/Cause: _____

Address: _____

Email: _____ Phone: _____

Donation Requested: _____

Date Needed By: _____

Details: _____

_____

_____

_____

_____

_____

_____

_____

_____

Federal Tax ID: _____

Please include any other information necessary when submitting request.

Water Park of America
by MALL OF AMERICA®

Please mail or fax completed form to:
Water Park of America
Attn: Donations
1700 East American Blvd.
Bloomington, MN 55425
P: (952) 854-8700 • F: (952) 854-8701

Radisson®
HOTEL BLOOMINGTON
BY MALL OF AMERICA®