Friends of Community Recreation (FCR)

P.O. Box 1755, Laramie, WY 82073-1755 * fcrlaramie@gmail.com

Donation Request Form

Date of Request: _____

Your information - Name of Person or Organization Making Request:

_____

Phone #: (____) ____-_____ ***Email Address:*** _____

Mailing Address: _____

Type of pass (or passes) being requested (Circle one):

Rec Day Pass Fitness Pass Ice & Events Center Pass Activity Registration Fees Other

Number of passes being requested? _____ ***Please provide the date you need the passes/registration by:*** _____

Will FCR be included on your advertising or recognized for our donation? (Yes or NO):

_____

Recipient Information Name of Person Receiving passes/registration:

_____

Phone #: (____) ____-_____ ***Email Address:*** _____

Mailing Address: _____

Please provide a brief summary of the circumstances, or necessity, for this donation request:

_____

_____

_____

_____

Some activity registration could qualify for the Rec Scholarship fund. Before submitting this to FCR, please contact Jodi Guerin, Recreation Manager, to find out if you qualify for Recreation Center scholarship assistance (jguerin@cityoflaramie.org; or (307)721-5269). If you do not qualify for assistance through the Recreation Center, then please proceed with your FCR Donation Request form.

Upon approval, passes are only valid 6 months after the date received. To submit this document for formal approval, please scan and email it back, or send through the postal service. **Donation requests are only approved during official FCR Meetings**, which are held the 3rd week of every month; therefore, it may take some time to hear back on your request. Our apologies for any inconvenience, thank you for your patience!

Email: fcrlaramie@gmail.com

Mailing address:

Friends of Community Recreation

P.O. Box 1755

Laramie, WY 82073-1755

Form last updated: 5.16.2018

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To be completed by the FCR Board only:

Amount Approved $___________

Roll Call Vote _________ Voice Vote _________

Date Approved _________

Expiration Date of Passes: ______________

FCR Approval (Print name) ____

(Signature) ____

For Office Use:

Check #___________

Amount $_________

Date ____________

Friends of Community Recreation is a 501©3 non-profit organization.

Form last updated: 5.16.2018