



Donation Request Form

Requests will be considered for Manitowoc, Calumet & Sheboygan counties WI

Requests needs to be submitted **30 days** prior to event

If your event is chosen - you will be contacted via email

PLEASE PRINT

Date: _____

Event Date: _____

Is there an event related to this request? Yes _____ No _____

Will Henning's Cheese be featured in an ad or signage at the event? Yes _____ No _____

Has Henning's ever donated to the organization/event in the past? Yes _____ No _____

Organization Information:

Contact Name: _____

Contact Email Address: _____

Contact Phone Number: _____

Organization Type/Name: _____

Organization Street Address: _____

City: _____ State: _____ Zip Code _____

Event Information:

Event Name: _____

Event Location: _____

Event Address: _____

City: _____ State: _____ Zip Code _____

Type of Donation Request: (Please select type – One request per form)

Gift Box _____ Gift Card _____

How many people will be attending the event? _____

How will this request be used at the event? _____

If Your Event Is Chosen:

Date you would stop by to pick up your donation? _____

Please **write a brief overview** describing the event – purpose of the event

Please mail to: Henning's Cheese
Attn: Donation Request
20201 Point Creek Rd
Kiel, WI 53042