

Contributor Registration Form TOTS 2019-2020

Organization Name: _____

**Please note the text entered above is the way your organization will be listed in all TOTS printed materials and signage.*

Organization Contact: _____

**The person listed here will be the contact for important communications and ticket benefits.*

Mailing Address:

_____ **Email:** _____

_____ **Phone:** _____

Organization Media Handles:

**These links and handles listed here will be used for website and social media benefits.*

Website: _____ **Twitter:** _____

Facebook: _____ **Instagram:** _____

Donation Information:

Cash Donation: **Amount:** _____

In-Kind Donation: **Amount:** _____

Description and Quantity of Items: _____

Costs incurred for shipping can be included in your in-kind contribution amount.

Signature: _____ **Date:** _____

I understand that by signing this form, I am responsible for the monetary donation and, if applicable, the items contained in my answers to this form. I understand Taste of the South will provide tickets and amenities upon receipt of the monetary contribution or upon receipt of this signed form (for in-kind goods). Benefits will be released only to the person listed as the organization contact on this form.

Taste of the South Contact: _____

With whom have you been working on the Taste of the South Committee?

Payment may be remitted with a check payable to 'Taste of the South', mailed to: **Taste of the South, P.O. Box 2826, Washington, DC 20013**. Alternatively, payment may be made by debit or credit card on our [website](#). Enter the cash amount of the donation and follow the prompts. Please note that card payments are subject to a processing fee. Delivery of in-kind, food, and/or silent auction contributions should be coordinated with your Taste of the South contact.

If you have any questions, please contact us as donate@tasteofthesouth.org.

Please submit this completed form to our [Treasurer](#) or to your TOTS contact to secure your sponsorship benefits.