



Dear Clients and Friends,

We realize there are many worthy charitable events and functions. We wish we could honor all the donation requests we receive, but unfortunately we cannot.

We understand that a request denial can be especially upsetting to our loyal long time clients. However, **Mi Salon Spa** and **Michaels College of Hair Design** organize many charitable events each year within our facility to give back to the community.

Thank you for your understanding.

Michael and Idajean Moore

Mi Salon Spa Donation Request Form

Mi Salon Spa is committed to helping local charity events for schools, churches and non-profit organizations. Due to stringent requirements for financial reporting, the attached form must be completed in its entirety and your group/event must meet ALL stated criteria to be eligible for any donation.

Donation Request Form Guidelines/Requirements

- Your request must include your Tax ID # or a copy of your organization's 501(c)3 designation.
- Your request must include an official printed flyer, posting, or mailing of the event stating the type and date of the event.
- The request must be received 4-6 weeks in advance of the event and can be submitted by email, mail, fax or in-person.
- The event must be for a non-profit event within a 20 mile radius of Florence, KY.
- The request must be submitted on the Mi Salon Spa Donation Request Form; no other request written or otherwise will be accepted for consideration.
- All requests approved will be gift certificates for specific services and are not redeemable for cash.

If you have any questions regarding the completion of the Mi Salon Spa Donation Request Form you may submit them via email. Due to the high number of submissions unfortunately we are unable to respond to each donation request. If your donation request is approved, you will be contacted to arrange for pickup.

Sincerely,

Melissa Graus

donation@misalonspa.com

Mi Salon Spa Donation Request Form

This form must be completed entirely for your request to receive consideration.

Today's Date: _____

Organization Making Request: _____

Contact Person(s): _____

Tax Exempt ID #: _____

Email Address: _____

Group Website: _____

Phone Number: _____ Fax Number: _____

Address: _____

City: _____ State: _____

Event Information

Date of Event: _____

Name and location of the event and a brief description:

Number of participants expected to attend event? _____

Will the event be held within 20 miles of Mi Salon Spa? _____

How will the donation be used (i.e. silent auction, raffle winner, etc.)? _____

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How will you be publicizing your event? _____

How will the funds raised through donation be applied?

How will Mi Salon Spa's contribution be recognized? _____

Phone number to arrange pickup: _____

Organization Information

Please provide a brief history of the requesting organization/group along with its purpose and mission:

Is the geographic area for your organization within 20 miles of Mi Salon Spa? _____

Has Mi Salon Spa ever donated to this requesting organization before? _____

If yes, please explain what and when:

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Is your organization a public or private establishment? _____

Indicate the type of service(s) your organization provides:

Health & Human Services

Arts & Culture

Educational

Environmental

Civic & Community

Other: _____

The undersigned hereby certifies that:

- a) The information in this application and supporting documents are correct to the best of his / her knowledge.
- b) The Internal Revenue Service 501(c)3 determination has not been revoked, cancelled, or modified.
- c) Donations will be used for the projects outlined in the application and agreed to by both parties.
- d) The undersigned also acknowledges that completion and submission of this form does not guarantee a donation.

X _____

Signature

Date

The following information should be attached to this application for consideration:

Copy of organization's 501(c)3 designation form (if applicable)

An official printed flyer, posting, or mailing of the event stating the type and date of the event.

Send completed forms and additional requested material to:

M. Graus

Mi Salon Spa

7535 Burlington Pike

Florence, KY 41042

donation@misalonspa.com