

# Celebration of Youth

SATURDAY, MARCH 8, 2025 | AMERISTAR CASINO RESORT SPA

## Donation Contract

Company/Individual Name (as it will appear in literature) \_\_\_\_\_

Business    Individual    I prefer to be listed as anonymous.

### Contact Information

Name \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (including area code) \_\_\_\_\_ Email \_\_\_\_\_

Donor Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

### Donated Item Information

Detailed item description (quantity, size, color and any other information to ensure proper understanding of the donated item):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Item Value (Fair Market Value) \_\_\_\_\_ Expiration Date \_\_\_\_\_ Solicited By \_\_\_\_\_

- Tangible item at auction    Donor provided gift certificate with contract    Rep needs to pick up item  
 Intangible item    This contract serves as certificate    Delivery by donor

### Office Use Only

Item Name \_\_\_\_\_

Category Name \_\_\_\_\_ Auction Type \_\_\_\_\_

Date Processed \_\_\_\_\_ Date Acknowledged \_\_\_\_\_ By Whom \_\_\_\_\_

Contract submitted for processing of donor acknowledgement. \_\_\_\_\_

### Donation Deadline: February 21, 2025

Youth In Need is a 501(C)3 organization. | Federal Tax ID: 43-1033862 | Your donation may be tax-deductible. Check with your tax advisor.

RETURN COMPLETED FORMS TO: Development Office | Youth In Need | 1815 Boone's Lick Road | St. Charles, MO 63301

CONTACT: Phone 636-946-5600 | Fax 636-946-2900 | [aberry@youthinneed.org](mailto:aberry@youthinneed.org)