



Jackson High School  
Swimming & Diving Booster Club

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## Auction Donation Form

Donor Representative Name: \_\_\_\_\_

Donor Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of Item or service being donated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approximate Retail Value: \_\_\_\_\_

**Thank you for your support!**

Please return this form or email the same information to Robyn at [robyn.ricciuticulp@gmail.com](mailto:robyn.ricciuticulp@gmail.com), by January 15, 2021.