

LOVE THE ARTS 2025

A Symphony of Wings

DONATION AGREEMENT

DONOR NAME *(Individual or Organization name, as you wish to see it published)*:

DONOR ADDRESS *(please include city, state and zip)*:

CONTACT NAME & PHONE:

EMAIL/WEBSITE:

ITEM INFORMATION: *Please attach or write below a **complete, detailed description** of artwork, item or service being donated. If you have **marketing materials** for auction display, please submit with item.*

RESTRICTIONS, if any:

EXPIRATION DATE: _____ RETAIL VALUE: \$ _____

Please date gift certificates from February 2025, preferably valid for at least one year.

DONOR SIGNATURE _____ Title _____ Date _____

Artwork, item or certificate (circle one):

Is attached/enclosed

Will be delivered on or before 1/8/25 to Volcano Art Center, 19-4074 Old Volcano Rd./PO Box 129, Volcano HI 96785

Needs pickup, please contact me at: _____

****JANUARY 8, 2025 IS THE FINAL DEADLINE FOR AGREEMENT & RECEIPT OF ITEMS**** QUESTIONS?
Call Co-Chair Chris at (808) 722-5777

THANK YOU FOR YOUR GENEROUS SUPPORT!



**VOLCANO
ART CENTER**
WHERE PEOPLE, ART AND NATURE MEET