



The Dough Shoppe
Tip Jar Donation Application

Group/Organization Applying: _____

Website: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Contact Phone: _____

Contact Person: _____ Title: _____

Contact Email: _____

- To be eligible you must:
- Be a 501(c)(3) nonprofit organization
 - Primarily serve Brown County residents

What will the funds be used for _____

Brief description of the groups mission statement or services : _____

The applicant acknowledges that if they are selected, they understand that The Dough Shoppe can not commit to any specific donation amount raised by the Tip Jar Donations.

The applicant must focus social media blasts in the days leading up to and during the selected month to create a sense of excitement for their social media followers.

The applicant must provide brochures or postcards to be available for customers asking for more information about the non-profit. The Dough Shoppe will not provide any materials.

The applicant must be available for pictures and to receive the donation at The Dough Shoppe which will be used on social media and for promotional purposes.

Signature

Print Name

Date

Internal Use Only:

Date Received: _____

Approved Yes No Initials: _____

Date Reviewed: _____

Notification Date: _____

Designated Month: _____