

LEGENDS

CASINO ♦ HOTEL

BONA FIED NON-PROFIT ORGANIZATION DONATION/CONTRIBUTION REQUEST FORM
RETURN DEADLINE - MARCH 31, 2020

Organization Eligibility: Local bona-fide non-profit and charitable organizations with a service area within 100 miles or Legends Casino Hotel will be considered. Proof of non-profit status shall be confirmed. Appendix X prohibits the distribution of funds to non-profit organizations with a direct affliction with the Yakama Nation as these accrued funds are specifically earmarked for non-tribal organizations.

ORGANIZATION NAME: _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

CONTACT NUMBER: _____ AMOUNT REQUESTING \$ _____

Please write a brief summary of the organizations needs for which you are seeking funding. Attach any other information necessary, along with a copy of your non-profit status form.
Any incomplete requests will be returned.

Return the complete form to:
Legends Casino Hotel • 580 Fort Road • Toppenish, WA 98948
attn: Bonnie Kent-Walker