A STARRY NIGHT
GALA & AUCTION

SATURDAY, MARCH 14, 2026

DONATION FORM

Donor or Business Name (as it should appear in program):

_____

Donor Contact Name: _____

Phone Number: _____ **Email:** _____

Donor or Business Address (including street, city, state, and zipcode):

_____

_____

_____

Detailed description including sizes, color, quantity, brand, etc.

_____

_____

_____

_____

Please list any restrictions (experiation dates, hours, number of people, availability)

_____

_____

The donated item is:

☐ **Tangible Item**

- ☐ Item accompanies this form
- ☐ Item will be delivered to NHS by the donor
- ☐ Item will be picked up by solicitor

☐ **Service or Virtual Experience**

- ☐ Gift Certificate provided by donor
- ☐ Gift Certificate created by NHS

Please return this form to : New Horizon School, 1111 S. Carr Road, Renton, WA 98055
or email tgordon@new-horizon-school.org

Submit your donation online: bit.ly/2026NHSDonation

NHS Federal Non-profit
Tax ID# 91-1673487
New-Horizon-School.org

New Horizon School
Where Children Come First

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