

Please complete this form and print two copies: one for your tax records and one to mail in with your donation. To donate to a specific cause, please check the appropriate box below.

Today's Date:

## PERSONAL/BUSINESS INFORMATION

Donor Name:				
Organization Name: (if applicable)				
Address:				
City:	State:	Zip Code:		
Country:				
Email:	Phone N	umber:	Home I	Mobile
I Want to Give: (check box) \$25	\$50 \$	00 Other am	ount:	
Amount of Check: \$	Please make pay	able to Greater Pal	m Springs Tourism Foundation.	
Please mail the check with this form to:	Gr eater Palm Spi 70100 Highway 1 Rancho Mirage, (		tion	

## PLEASE MAKE MY DONATION SUPPORT THE FOLLOWING:

Select your desired cause. This will enable us to apply your donation where you intend.

Hospitality Workforce Relief Fund: Helps hospitality workers impacted by COVID-19

All Tourism Foundation initiatives: Provide support where it is needed most

4-Year Degree: Provide college scholarships for students enrolled in a qualifying major

2-Year Degree: Provide college scholarships for students enrolled in a qualifying major at College of the Desert

**6-Week Certificate Program**: Provide college scholarships for students enrolled in CSUSB Palm Desert's online Hospitality Management Certificate Program

Thank you for your support. Your questions and feedback are important to us.

Please feel free to contact Gary Orfield, Director of Development, at gorfiled@gpscvb.com or 760-969-1335.