

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 scholarship, please check the appropriate box below.

	Тос	day's Date:			
	PERSC	ONAL/BUSINESS	INFORMATION		
Donor Name:					
Organization Name (if applicable):				
Address:					
City:		State: _	Zi	p Code:	
Country:					
Email:		Phone N	umber:		bile
I Want to Give: (check box)	\$25	\$50	\$100	Other amount:	
Amount of Check: \$		_ Please make pay	yable to Greater F	Palm Springs Tourism Foundation.	
Please mail the check with this f	orm to:	Greater Palm Sp 70100 Highway 1 Rancho Mirage,		ndation	
		ATION SUPPORT To a support of the su		SCHOLARSHIP nation where you intend.	
All Tourism Foundation i	nitiatives: Prov	ide support where	it is needed most		
4-Year Degree: Provide	college scholo	arships for student	s enrolled in a qu	alifying major	
2-Year Degree: Provide	college scholc	arships for student	s enrolled in a quo	alifying major at College of the De	sert
6-Week Certificate Proj in CSUSB Palm Desert's	~	•	•		
CTA Certification: Prov employees in Greater P		os for Tourism Amb	assador certifica	tion to deserving hospitality	

Please feel free to contact Bob Thibault, Chief Development Officer, at bthbault@gpscvb.com or 760-969-1339.

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