

Please print this form and complete the information below to ensure proper preparation of your tax receipt. (print clearly)

To donate to a specific scholarship program, please check the appropriate box below, and also write the name of the scholarship on the memo line of your check.

·	ite:		
Donor Name:		NFORMATION	
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Address:			
City:			o Code:
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	Phone Number: Home Mobile		
I Want to Give: (check box) \$25	\$50	\$100	Other amount:
Amount of Check: \$ Pleas	se make pay	able to Greater F	'alm Springs Tourism Foundation.
70100	iter Palm Sp O Highway 1' ho Mirage, (ndation
PLEASE MAKE MY DONATION S Please mark with an "x" your desired cause. T Where It Is Needed Most: Support all of the se CTA Scholarships: Provide scholarships for Te employees in Greater Palm Springs	his will enak cholarship c	ole us to apply you and disaster reliet	ur donation where you intend. programs
High School Scholarships: Provide college so and culinary academies at Greater Palm Spri			ool students enrolled in hospitality
College Hospitality Program Scholarships: Prat the CSUSB Palm Desert Campus Hospitali			or students enrolled
Other (please specify): Please also indicate the no	ame of the spec	cific cause on the men	no line of your check.

Thank you for your support. Your questions and feedback are important to us. Please feel free to contact Bob Thibault, Chief Development Officer, at bbb Thibault@gpscvb.org or 760-969-1339.