CHRISTIAN CENTRAL ACADEMY
K-12 College Preparatory School

Tracking #_____Date_____

CCA Contact_____

GALA AUCTION DONATION FORM

DONOR INFORMATION:

Business/Contact Name_____Email_____

Website_____Phone_____

Street Address_____

City_____State_____Zip_____

Contact Person_____Phone_____

Name for Program Book_____
(if different from above)

GIFT ITEM INFORMATION:

Item_____ Value_____

Description for Program Book_____

_____

_____

_____

Physical Item: Date Received_____

To Be Delivered:____ Date:_____ or To Be Picked Up:____ Date:_____

____**Certificate: (please list ALL specifications)** Date Received_____

To Be Delivered:____ Date:_____ or To Be Picked Up:_____ Date:_____

ADDITIONAL INFORMATION/COMMENTS:

_____

_____

THANK YOU FOR SUPPORTING CHRISTIAN CENTRAL ACADEMY!

PLEASE RETURN WHITE AND YELLOW FORM TO:

Christian Central Academy
c/o Gala Office
39 Academy Street
Williamsville, NY 14221

Office: 716 634-4821 ext 122
Email: gala@christianca.com
Web: http://christianca.maestroweb.com

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