Lake Region Community Dock Foundation
Non-Profit Organization Registration Application

CONFIDENTIAL

(We do not share or sell your information to anyone.)

PRINT legibly, please.

Non-profit Organization Name:	**Authorized Contact Person:**
Mailing Address:	**Mailing Address:**
City, State, Zip:	**City, State, Zip:**
Phone #:	**Phone #:**
E-mail:	**E-mail:**
EIN #: ☐☐-☐☐☐☐☐☐☐	

I understand that Lake Region IGA Supermarket will donate 1% of the net purchase* of their Preferred Customer Card users who have requested it do so via application, to the local, non-profit organization on this form. The donation amount is credited to the organization's account. The amount is received via a check on a quarterly basis.

I understand that this non-profit organization must indicate the organization's tax ID # (EIN #) to be registered in the Lake Region Community Dock program and before it can begin accumulating donations.

I am the authorized contact person on behalf of this organization for the Lake Region Community Dock Foundation.

Authorized Contact Signature:

_____ Date _____

***Net Purchase is the receipt total minus milk, tobacco products and store coupon items. Beer Store purchases are not valid for donation purposes.**

Rev.0211