

Fundraiser Agreement

Please fill out and return this form by...

Fax: (206) 467-0993

Scan & email to: christine@cougar-mountain.com

Mail: 4224 24th Ave. W, Seattle, WA 98199

(please keep a copy for your records)

Name of Organization	
Organization Address	
Contact Name	Contact Phone #
Email Address	
Fundraiser Start Date	nd include at least two weekends.)
Fundraiser End Date	
Fundraiser Order Date	eduling your delivery date.)
Requested Delivery Date	Time: available M-F 8:30am – 5:00pm)
Dough must be refrigerated (not just	picked up) within 4-5 hours after our delivery
Do you have facilities to store dough	if it's not picked up on delivery date?
Address for cookie dough delivery:_	
	from where we can park, level ground, etc. We cannot deliver up or down stairs.) 120 tubs/30 mile limit, 220 tubs/60 miles. 60+ miles to be determined)initial***
	delivery-CASH or CHECK (no personal) onlyinitial*** e this into delivery date. We need 48 hrs notice if you need a copy of invoice.)
Name/Address for brochure delivery	
Number of participants	Number of brochures needed
By what date would you like brochure	es delivered?Please allow 48 hours for processing.
Please check the box below and understand the terms of this agr	type your name to acknowledge that you agree to and reement.
I agree to the terms of this a	greement.
Contact signature (must be 18 or	Date
(must be 18 or	older)

If you do not receive confirmation of receipt of this form within 1 business day, please contact us.

Any questions? Please call Christine at (206) 467-5044 ext. 202

We wish you great success!