

Donation Request Form

Today's date:			
Name of organization:			
Address:			
City:	State:	Zip:	
Contact person:			
Phone:			
Email:			
I've read the Donation Request Guidelines			
Please describe your request:			
Request for: Item Mor	netary donation Spo	onsorship	
What are the benefits to the community?			
Does your organization have a current relationship with Guardian Credit Union?			
Has Guardian Credit Union donated to your organization/cause in the past?			



Monetary Donations

Date funds are needed:
(at least 30 days from request submission

To whom should the check be made payable?

Address to which the check should be mailed:

Item Donations

Date item is needed: (at least 30 days from request submission)

At which branch would you like to pick up item?

Oak Creek West Allis West Milwaukee South Milwaukee

Menomonee Falls Waukesha

Please return request forms to any Guardian Credit Union branch, by email to marketing@guardiancu.org or by mail to Guardian Credit Union Marketing Department, 11220 W. Oklahoma Avenue, West Allis, WI 53227.