Logo

Description automatically generated **Collision Industry Foundation**

**ANNUAL DONOR PROGRAM ORDER FORM**

**Vision: Provide Emergency Relief to Collision Repair Professionals**

**Mission: Secure and distribute donations to individuals who have experienced significant losses due to natural disasters or other catastrophic events.**

1. **Primary Contact Information (please print)**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Displaying As (if different than company name):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company URL address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Logo**: Please email a high resolution image of your company’s logo as a PNG or JPG file to [petra.schroeder@comcast.net](mailto:petra.schroeder@comcast.net)

Do you approve of the CIF listing of your company name (and URL address) on the CIF website?

**▢ Yes ▢ No**

Do you have any comment(s) that you would like to share regarding you and/or your company’s support of CIF? If yes, see Comments Section at the bottom of this document.

**▢ Yes ▢ No**

Does CIF have your approval to utilize it for social media or a press release announcing your donor level and support of CIF?

**▢ Yes ▢ No**

In case you wanted to show your support of CIF by listing the CIF website logo on your company’s website, here it is: [www.collisionindustryfoundation.org](http://www.collisionindustryfoundation.org)

1. **Billing Contact (please print) - FILL OUT ONLY IF IT IS DIFFERENT FROM THE PRIMARY CONTACT**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Become an Annual Donor. 5 different donation levels are available:**

**▢ Tier 1 1st RESPONDER 10K+**

**▢ Tier 2 URGENT CARE 5K+ to <10K**

**▢ Tier 3 IMMEDIATE CARE 1K+ to <5K**

**▢ Tier 4 PRIMARY CARE $500 to <1K**

**▢ Tier 5 FIRST AID min. $50 to <$500**

**Total Annual Recurring Donor Amount:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE NOTE THAT THIS RECURRING **ANNUAL DONOR PROGRAM** RENEWS ON JANUARY 1st. AN INVOICE WILL BE SENT AT BUDGET TIME AUGUST / SEPTEMBER WITH A DUE DATE OF FEBRUARY 28 OF THE FOLLOWING YEAR. YOU WILL BE ABLE TO TERMINATE YOUR PARTICIPATION AT ANY TIME. IF YOU TERMINATE AFTER PAYMENT HAS BEEN RECEIVED, THERE WILL BE NO REFUNDS.

Should you not want to commit to the Annual Donor Program, please consider the **GENERAL** **DONATION** option here: https://www.collisionindustryfoundation.org/donate.html

By signing below the Donor agrees to have read and agreed upon terms & conditions within this document.

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Please Print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMMENTS SECTION TO BE POTENTIALLY USED FOR SOCIAL MEDIA (Facebook and LinkedIn), WEBSITE AND PRESS RELEASES