



Business Fundraisers Commitment Form

Business Name:

(Please enter name exactly as you would like it to appear online)

Address:

Contact Name:

Phone:

Email:

Business Facebook:

Instagram:

Twitter:

Number of Employees:

Goal (if you have one) - Total Donor #, Total Dollar amount, etc:

Will you be offering to match donations (circle)? Yes No

If yes, please describe the match (i.e. Dollar for Dollar, Fixed amount, participation based etc)

Would you like an onsite orientation or presentation from ACT staff? Yes No

Signature

Date

**Please email completed form no later than April 1, 2020 to:
Celeste.Flores@ACTforAlexandria.org**