



# CHERRYFIELD ACADEMY COMMUNITY CENTER

## Donation Form

Name \_\_\_\_\_

Address \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

Amount of Donation \_\_\_\_\_

Date \_\_\_\_\_

Category Preference (please check your preference):

Most Needed

General Maintenance

Furnace Fund (for second floor)/Heating the building

Performing Arts

Work Shops

If you would like to make your donation in memory of someone, please check the following and fill out the required information:

Memorial

This donation is made in memory of

\_\_\_\_\_

If you would like, please share a short paragraph about the person you are making the donation in the name of. If you would like to add a photo please mail it to us or e-mail it to us.

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

(Memorial information will be added to the Memorial page)

E-mail Address ~ [catrustees2012@gmail.com](mailto:catrustees2012@gmail.com)

Phone ~ 546-6035 or 546-6053

Please make checks payable to: CA Trustee Thank you.

Please mail check to: CA Trustees, 53 Main Street, Cherryfield, ME 04622