



McDonald's® Donation/Discount Application

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All Requests Must Be Received At Least 10 Days In Advance of Scheduled Event

A Message from the Owners

We are proud to serve the citizens of Hendersonville, Brevard, and Canton. We consider ourselves very fortunate that these communities have welcomed and supported us so very favorable in the years we have owned and operated our McDonald's business. It is both our pleasure and our responsibility to give back to our communities through countless donations to literally thousands of worthy projects and events.

It is our pleasure to give serious consideration to the support of your event. Your request may or may not be granted depending upon a wide range of factors including but not limited to legal considerations, timeframes, the percentage of benefit actually reaching its intended source, and the number of projects we may be supporting at any given time.

In order to ensure that your request may be implemented properly, we hope you will understand that we should receive your request at least 10 days prior to your scheduled event. Although this sometimes may seem to complicate the process, we have learned that in order to process your request and ensure the appropriate personnel are notified, this is a necessary step to ensure a smooth transaction.

Please thoroughly complete the information requested on each page of this application and return it to us using one of the methods shown below. We will give your request serious consideration. Thank you for also supporting our community, for choosing McDonald's, and for your continued support.

Chuck and Teresa Edwards

Owners

Please Send Completed Application Using One of These Methods

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Fax (828) 697-4338

Email: angie@cedwardsgroup.com

US Mail: McDonald's Office
337 North Main St.
Hendersonville, NC 28792

Office Use	
Date Request Received:	10 Day Notice: yes no
Approval:	Date:
519 Account:	
Commitment:	
Manager Communication:	Date:



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PLEASE CLEARLY PRINT OR TYPE ALL YOUR RESPONSES

Benefit Organization		
Organization Name:		
Organization Address:		
City:	State:	Zip:
Organization Main Phone No:		

Contact Information	
Contact Name:	Title:
Daytime Phone:	
Evening or Cell Phone:	
Email:	Fax:

Event	
Name:	Date:
Description:	
Who Is This Benefit Targeted Towards?	
Has McDonald's Supported This Event In The Past?	
If Yes, Date(s) Previously Supported:	
If Yes, Who Was The Contact For The Past Event?	
What Was Our Previous Level of Support?	

Donation or Discount Request
How May We Best Help In Support of Your Event?
What Would Be An Alternative Method In Which We May Help You?

Applicant Signature	
By signing below, I acknowledge the following:	
1- I am an authorized agent of the organization listed.	
2- Any products or materials granted through this request will only be used in support of the event noted.	
3- Any products or materials granted will only be used in the manner in which they are intended.	
4- The items obtained through this request will not be used for resale.	
5- McDonald's may use my name and the organization name in promotional materials.	
Signature:	Date:
Printed Name:	Title: