



ARTS CENTER LAKE PLACID

☐

Yes! I would like to donate to the silent auction to benefit the Arts Center!

Contact person: _____

Donor/Business name for program listing

and tax acknowledgment: _____

Full mailing address: _____

Phone: _____ Email: _____

Item Donated: _____

Value of Donation: _____

Description of donated item: _____

Special limitations and/or expirations: _____

FOR OFFICE USE ONLY:

ARTS CENTER LAKE PLACID, 17 ALGONQUIN DRIVE, LAKE PLACID, NY 12946

PHONE: (518)523-2512

EMAIL: INFO@LAKEPLACIDARTS.ORG

WEB: LAKEPLACIDARTS.ORG

_____ Item Received _____ Need to Pick up _____ Need to make gift certificate _____ Posted on computer