



# United States Women of Today

## Buckets of Sunshine Participation Form<sup>51</sup>

PLEASE TYPE OR PRINT. Send completed form to USWT Public Relations Director postmarked no later than May 1st.

Name \_\_\_\_\_

Chapter \_\_\_\_\_ State \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

Date of Project \_\_\_\_\_

Project Chair/Contact Person \_\_\_\_\_

Number of members participating \_\_\_\_\_

Other organizations participating \_\_\_\_\_

Name, address, type of facility/agency receiving donation \_\_\_\_\_

Type of bucket donated & contents \_\_\_\_\_

Cash value of donation \$: \_\_\_\_\_ No. of buckets donated \_\_\_\_\_

Source of buckets and contents (i.e. member donations, purchased with chapter funds, outside donations, special project held to raise funds, etc.):



## Women of Today Buckets of Sunshine