



Charitable Organization Application

Fill out the application below for a qualifying interview. Once accepted your charitable organization will be setup to receive donations through us.

First Name: _____

Middle Name: _____

Last Name: _____

Title: _____

Phone Number: _____

Please let us know when the best time is to reach you: _____

Organization Name: _____

Address: _____

Address Line 2: _____

City: _____

State: _____

Zip Code: _____

Web Address: _____

Email Address: _____

Please describe your organizations charitable focus:

Would you like to tell a friend or colleague? Everyone benefits from our team efforts. Tell them about us and ask them to visit www.ChampionsandHeroes.com. or we can send them an email invite. All you have to do is tell us where to send the info.

Friend or Colleague email address: _____

Please fax this form to: 1-888-820-1134. Once we receive your information you will be contacted for a qualification interview with one of our staff members.