



**A. DONOR INFORMATION:**

Donation Amount\*: \$ \_\_\_\_\_

*\*Please note Kubb United Inc. does not disclose the donation amount.*

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Company (Optional): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip/Postal Code: Country: \_\_\_\_\_

Email Address: \_\_\_\_\_

**B. TO MAKE YOUR GIFT IN HONOR OF OR IN MEMORY OF AN INDIVIDUAL OR FAMILY MEMBER, PLEASE COMPLETE THE FOLLOWING SECTION (OPTIONAL):**

**I would love my gift to be (choose one):**  In honor of  In memory of **Honoree:**

Please send acknowledgement of my donation to:

Address: \_\_\_\_\_

City: State: \_\_\_\_\_

Zip/Postal Code: Country: \_\_\_\_\_

**C. PLEASE ENCLOSE YOUR CHECK DONATION WITH THIS FORM. PLEASE DO NOT SEND CASH. PLEASE MAKE CHECKS PAYABLE TO: [Kubb United](#)**

**Please send donation along with this form to:**  
Kubb United Inc.  
5075 Irish Ln  
Fitchburg WI 53711