



starsvolleyballclub.com
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Silent auction item donor form

Kindly complete this form and submit with donation.

Stars Parent Name _____ Age group _____

Donor Name (individual or company) _____

Address _____

Phone: _____ Email _____

Detailed description of item

Retail dollar value of item \$ _____

Any limitations/expiration on item/experience *(unless otherwise noted, all donations valid until April, 2023)*

Donor signature _____

Date _____