Bill Barnett Legacy Fund Contribution Form

Donor Information

Name: _____

Email: _____

Phone Number: _____

Mailing Address: _____

_____

Donor Plaque Recognition

Each $500 donation qualifies for a commemorative tile on our Donor Recognition Wall

Donation Details

Total Donation Amount: $_____

Number of Plaques Requested (1 per $500): _____

Payable to Newport Aquatics Boosters * PO Box 1031 * Newport Beach, CA 92659

Plaque Inscriptions - 30 characters (including spaces) on 1 line, or 28 characters (including spaces) on two (2) lines.

Tile 1: _____

Tile 2: _____

Tile 3:_____

Tile 4: _____