



**Santa Cruz County Parks**  
 979 17<sup>th</sup> Avenue  
 Santa Cruz CA, 95062  
 Ph: (831) 454-7901 – Fax (831) 454-7940  
[www.scparks.com](http://www.scparks.com)

## Donation Form

**Donor information:**

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please check the box where you would like to make a donation:**

- |  |   |
|--|---|
| <input type="checkbox"/> Aquatics Programs: \$_____  | <input type="checkbox"/> Youth Recreation: \$_____          |
| <input type="checkbox"/> Simpkins Family Swim Center (including waterslide replacement): \$_____ | <input type="checkbox"/> Adult & Senior Recreation: \$_____ |
| <input type="checkbox"/> Recreation: \$_____   | <input type="checkbox"/> Quail Hollow Ranch: \$_____        |
| <input type="checkbox"/> Other (please specify): _____ \$ _____                                  | <input type="checkbox"/> The Farm Park: \$ _____            |

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**Keep this bottom portion for your records.**

Your donation for \_\_\_\_\_,

valued at \$ \_\_\_\_\_ may be tax deductible, please contact your tax professional. Our Federal Tax ID

Number is 94-6000534.

**THANK YOU for your donation!**  
**Santa Cruz County Parks**