Riverview Hall Funds Association - Charity Contact Information Form

Organization Information			
Organization Name			
Office Phone		Office Email	
Mailing Address			
City		Postal Code	
Website		Facebook Page Name	
Principal Contact Information			
First Name		Last Name	
Title/Position		Cellphone (preferred)	
Daytime Phone		Evening Phone	
Email Address			
Mailing Address			
City		Postal Code	
Secondary Contact Information			
First Name		Last Name	
Title/Position		Cellphone (preferred)	
Daytime Phone		Evening Phone	
Email Address			
Alternate Contact Information			
First Name		Last Name	
Title/Position		Cellphone (preferred)	
Daytime Phone		Evening Phone	
Email Address			
Alternate Contact Information			
First Name		Last Name	
Title/Position		Cellphone (preferred)	
Daytime Phone		Evening Phone	
Email Address			
Additional Emails (All emails reagrding your organization will be sent to the email addresses listed on this form)			
Name		Email Address	