

TRIBAL SUPPORT

Please complete this application to apply for tribal donations from Desert Diamond Casinos & Entertainment. Refer to the guidelines at http://www.ddcaz.com/index.php/misc/community for eligibility requirements and application deadlines. See back for additional space and mailing information. Please type or print legibly.

Organization Name:			Submittal Date:	
Contact Person's Name:		Title:		
Phone: Fax:		Email:	Email:	
Mailing Address:		City/State	City/State/Zip:	
Name of Program/Event:			Date of Event:	
Total Amount Requesting: G		Geographic A	eographic Area Impacted by Event/Project:	
Brief description of how fun	ds will be used:			
Previous Desert Diamond C	asino contributions? (If y	es, provide dat	e and amount of each.)	
Additional Comments (incl	ide any printing deadline	z):		
Traditional Goldment (men	the my printing dedunited	.) .		
			annot be reviewed without this so needed. Supplementary information that	
relates to this request can also b				
Signature:			Date:	

DESERT DIAMOND CASINOS & ENTERTAINMENT TRIBAL SUPPORT



Additional space:				

Mail application forms, proof of non-profit status or tribal enrollment card (if applicable), and additional attachments to:

Desert Diamond Casinos & Entertainment Community & PR Coordinator P.O. Box 22230 Tucson, AZ 85734

Or email applications to: communitysupport@ddcaz.com (follow-up is highly recommended)