

Where Giving Back Never Tasted So Good

(Fun)raiser Form

The Hitch Burger Grill will giveguests that your organization brings in		/ manager) of the sales to your group for a	ıll of the
Information (please print or ty	vpe)		
Organization Name			
Type of Organization			
Preferred Event Date			
Preferred Event Time			
Estimated Number of Attendees			
Contact Name			
Email			
Phone			
How did you hear about us?			
Billing Information (please print of the control of			
Billing address			
City, State, Zip Code			
Organization Representative	 Date	- Hitch Burger Representative	— Date