

Blue Devil Club

Weight Room Equipment Donation

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Donation Amount \_\_\_\_\_

If donating a piece of equipment, please list the piece you would like to donate and what you would like on the plaque.

Equipment \_\_\_\_\_

Name Plate \_\_\_\_\_

If donating at least \$1000.00, please list name that you would like to appear on donor board.

\_\_\_\_\_

Thank you in advance for your kind support of Mt. Lebanon Athletics and our student athletes!!