

TABI Donation Application Form

1: Applicant information

Name		Phone number <i>*We will contact you this number</i>	
Name of School or Organization		School or Organization address	
Job title		Email	
Website/ FB/ Instagram <i>*If you have</i>			

Assignment Level:

- Elementary School
- Middle School
- High School
- College
- Other ()

2: Description of the event or Project

Project Title	
Event date	
Total number of tabis	
Materials to be presented to MITA SKY+ MITA KIMONO	Photos: YES / NO VIDEO: YES / NO FB: YES / NO Instagram: YES / NO

Signature of Applicant: _____

Date: _____

**Submit your application of the event or project by email to: info@mitasky.com*

