Submission Form

Owner Information

Name

Address

City State Zip Code

Phone (home) Phone (work)

Fax Email Address

Property Information

Resort Name

Address

City County State Zip Code

Phone Fax

Ownership details

Property Usage (Check One)

☐ Annual ☐ Bi-Annual

			(circle Yes or No)	
Number of bedrooms		Is the property deeded?	Yes	No
Number of bathrooms		Do you have a loan?	Yes	No
If fixed week, what number		Are current maintenace fees paid in full?	Yes	No
If floating week, what season				
If points account, how many		When is the property next available for use?		

Non-Profit to Donate to

The Children's Home
Name

243 Pine Street
Address

Mount Holly Burlington NJ 08060
City County State Zip Code

609-267-1550 x184 609-261-5672
Phone Fax

How did you hear about us?

☐ Internet Search
☐ Friend
☐ Postcard
☐ Other: _____

Please mail this back to Resort Closings, Inc. with a copy of your recorded deed and the signed consent form.

All donation are contingent upon the donors acceptance of all terms, conditions and disclaimers at www.donateforacause.org.