

RECEIPT: Make checks payable to Platinum Coast Orchid Society

Received from Sponsor_____

A donation in the amount of _____

Date: _____ Received by Member: _____

***Return this portion to Laura Blackmon, Sponsor Chair, text 321-745-9046, or email
leblackmon@bledsoe.net***

Award Sponsorship and Door/Raffle Prize Contributor Form
PCOS 61th Annual Show "Wild About Orchids"
May 1, 2, and 3, 2026
Kiwanis Island Park Gymnasium

Award Sponsorships

\$25 Sponsorship

\$50 Sponsorship

\$75 Sponsorship

Other Amount

Raffle & Door Prize Contributions

Orchid(s) as Door/Raffle Prize in the amount of \$_____

Door/Raffle Prize donation of your choice

Gift Certificate in the amount of \$_____

Award Sponsorships are displayed on a Sponsor Board at the entrance to the Show and also displayed with the Award in the Orchid Exhibit. Door prizes will be announced during the Show.

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Member: _____ **Date:** _____