

ITEM FORM:

Denver School of the Arts
Orchestra Department
7111 Montview Blvd.
Denver, Colorado 80222 (720) 424-1700

For Office Use Only

Item
Category_____

Retail Value_____

Minimum BID_____

Bid increment_____

Orchestra Parent Name_____

Orchestra Student Name_____

Phone_____Email_____

Donor_____

Donor Address_____

Donor Phone_____Email_____

Gift Card

Gift Certificate: certificate must accompany

Item

Item description:_____

Retail value \$_____