



# 2026 In-Kind Donation Form

For more information visit [www.roundupforautism.org](http://www.roundupforautism.org)

Donor Name: \_\_\_\_\_  
(Please list your name as you would like to appear in printed materials)

Contact Name: \_\_\_\_\_  
(Who can we contact about this donation?)

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Description of Donation: \_\_\_\_\_

\_\_\_\_\_

Restrictions (if applicable): \_\_\_\_\_

\_\_\_\_\_

Expiration Date (if applicable): \_\_\_\_\_ Market Value/Cost: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## DELIVERY INSTRUCTIONS:

Item delivered with contract (Date): \_\_\_\_\_

Item to be delivered (Date): \_\_\_\_\_

Item to be picked up (Date): \_\_\_\_\_

The Bobby Norris Roundup for Autism is an active 501 (c)(3)  
Through this initiative proceeds raised directly benefit the  
children, families, and adults of the Autism Treatment  
Centers of Texas.

Bobby Norris Roundup for Autism EIN: 75-2554391 | Please keep a copy of this form for  
your tax records. **Please email to [christie@roundupforautism.org](mailto:christie@roundupforautism.org) or mail to:**

Roundup for Autism • PO BOX 161533 • Fort Worth, TX 76161