

FUNDING INSTRUCTIONS FOR ORGANIZATIONS

	ORGANIZATION INFORMATION
Organization Full N	ame:
Organization Addre	SS:
С	ity: State: ZIP:
DragonFly Organiza	ation or School Code*:
Name of DragonFly	Cash Account:
Amount to be Depo:	sited to DragonFly Cash Account:
	CONTACT INFORMATION (in case we have any questions)
Full Name:	
Email:	Phone:

2 Send check (Payable to DragonFly Athletics, LLC) to the address below:

DragonFly Athletics, LLC P.O. 1153 Hartselle, AL 35640

Complete the information below:

^{*}Funding via mail-in check typically takes 2-4 weeks to complete.

^{*}Your code can be found next to your school or organization name when you log in to DragonFly.