## Sponsorship Request Form



Organization Information					
Organization Name					
Doing Business As (DBA) name, if applicable					
Request Date (MM/DD/YYYY)					
Organization Mailing Address	Street				
Funds will be mailed to this address	City			State	Zip
Website					
Tax ID (EIN) number					
Tax Exempt status (select one)	501c3	501c6	170c	Other	
If Other (describe)					
Contact Information					
Contact Name					
Title					
Phone		Email			
Event Information					
Event Name					
Event Date (mm/dd/yyyy)	Event Location (City, ST)				
Requested Amount (can be a range)					

Briefly describe the event and how it will aid in your organization's mission. Be specific. *(maximum of 750 characters)* 

## Sponsorship Request Form



Briefly describe the sponsor benefits and how sponsors will be recognized. Please attach relevant sponsor and event information (sponsor packet, event flyer, etc.). (maximum of 750 characters)