



SPONSORSHIP AND DONATION REQUESTS

Sponsorship requests must be submitted online [via this link](#).

The below list of questions is provided in order to help you prepare your answers before submission.

Organization Name

Contact Person

Organization Contact Information

Tax Status & Tax ID Number

Purpose: Health & wellness; youth & education; culture & humanities; civic enhancement

Amount Requested (\$)

Have you received a monetary donation from this hospital in the past?

If so, how much and when?

List your major contributors to this event/cause:

Are any other fundraisers planned (or have taken place this fiscal year)? Please list:

If this request is for a specific event, list the date(s) of the event.

Is there a possibility to have an informational booth at the event? Will you provide a canopy, table or chairs?

Does the sponsorship or donation include any advertising or promotional efforts? If so, please list below.

Please list any deadlines that should be considered.

Are any hospital employees actively involved in your organization?

If yes, please list their names and functions within your organization.

How many people will benefit directly from your efforts?

What is your organization's primary focus?

If other local organizations provide similar services, indicate how your program is unique.

How exactly will the funds you are applying for be used? (List local projects or economic benefits. Please be specific.)

How will this project address local community needs?