

## Charitable Contribution Application

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### ORGANIZATION INFORMATION:

Name of Organization: \_\_\_\_\_

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

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

Contact Person: \_\_\_\_\_

Summary of Organization's Mission and Objectives:

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### EVENT INFORMATION:

Date of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Expected Attendance: \_\_\_\_\_

Summary of the Event:

Sponsorship Opportunities:

Monetary Request: \_\_\_\_\_

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Applicant's Signature

date