



KEEPING YOU CONNECTED

## Sponsorship Request Form

All organizations will have a decision on their request within (4) weeks of submitting.

**Organization:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

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

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

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

**Event Date:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Reason for Sponsorship:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Type of Sponsorship Requested:**

**Monetary - Amount:** \_\_\_\_\_ **Door Prize** **Free Services** **Other:** \_\_\_\_\_

- *No sponsorships will be made toward individuals*
- *All donated money will be utilized in the WTC service area.*

**How will WTC be recognized?**

\_\_\_\_\_  
\_\_\_\_\_

**Submit form and any questions or comments to [sponsorship@wtcks.com](mailto:sponsorship@wtcks.com)**

**Note: Please attach supporting documentation - e.g. flyer, letter, etc.**

Date Received: _____	<i>For Internal Use Only</i>
Approved by: _____	
Type of Sponsorship/Amount: _____	