

SPONSORSHIP/DONATION/FUNDING APPLICATION FORM

APPLICANT DETAILS	
Date of Application	
Name of Group/Individual	
Address	
Organisation Type	
Age Group of the Community this event,	:/project will sponsor
Purpose of Sponsorship/Donation/Fund	ding
Contact Name	
Contact Mobile Number	
Contact email address	



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DETAILS OF SPONSORSHIP/DONATION/FUNDING	
Amount Requested	
Full Sponsorship Partial Sponsorship Any Donation	
Estimated Event Cost/ Required Funding Cost	
Has this Club/Group/Individual received funding from Pennyburn Credit Union in th	e past
Yes No	
Is Pennyburn Credit Union the main sponsor	
Yes No	
Please list other potential sponsors (If applicable)	
Describe how Pennyburn Credit Union will be recognised as a sponsor	
DETAILS OF EVENT	
Date of Event Length of Event	
)
Event Location Target Audience	
DECLARATION:	
I confirm that the information given is correct, to the best of my knowled that any money received will be used for the sole purpose stated in the ap	lge, and plication
SIGNATURE:	
DATE:	
PRINT NAME:	



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SUBMITTING APPLICATION

<u>Please send completed application forms to:</u>

19 GREENHAW ROAD,

DERRY

BT48 7RZ

<u>or via email to:</u>

info@pennyburncreditunion.co.uk

OFFICE USE ONLY				
)rganisation				
Date				
Sponsorship Approved		Sponsorship Rejected		
Comments				
<				
Cheque/Bank Transfer	Payee/Chequ	e No: Date Issued:		