



SPONSORSHIP/CHARITABLE CONTRIBUTION APPLICATION

Submit cover letter & completed application to:
Vermont Federal Credit Union, Marketing Department / PO Box 407 / Burlington, VT 05402 / phone 888-252-0202 / fax 802-658-9628 email marketing@vermontfederal.org

Section 1

Name of Organization: _____

Contact Person & Title: _____

Address: _____

City/State/ZIP: _____

Phone: _____ Fax: _____

Email: _____

Are You (personally, or your organization) a Member of Vermont Federal Credit Union?
Yes _____ No _____

Are You a Non-Profit Organization? (Preference will be given to registered non-profits)
Yes _____ No _____ If yes, please provide the Non-Profit Tax ID # _____

Section 2

Name of Event/Program: _____

Date(s) of Event/Program: _____

Location of Event/Program: _____

Brief Overview of the Event/Program: _____

Describe How this Event/Program is Expected to Benefit the Community: _____

Primary Target Audience of Event/Program: _____

Number of People Expected to Participate in Event/Program: _____

Section 3

Dollar Amount Requested: _____

What specifically will the funding be used for? _____

If This Request is Approved, Make Check Payable to: (individual names will not be accepted; checks must be made payable to an organization)

If Requesting a Donation Other Than Money, Please Describe Requested Item(s): _____

Section 4

If Vermont Federal Credit Union Will be Recognized for Our Contribution to the Event/Program, List All Advertising and Promotional Opportunities:

If Vermont Federal Credit Union Needs to Provide a Banner or Other Materials for the Event, Provide the Name and Phone Number of the Person in Your Organization Responsible for Picking Up and Returning the Banner:

Vermont Federal Credit Union Use Only

Application Receipt Date: _____ Application Review Date: _____

Committee Decision/Action Taken: _____

Comments: _____
