



## Sponsorship Request Application

The City of La Porte is excited to potentially partner with your program or event. Please fill out the information below and return it to the City.

<b>Organization Name:</b>	<b>Contact Name:</b>
<b>Federal Tax I.D.:</b>	<b>Contact Number:</b>
<b>Organization Address:</b>	<b>Contact Email:</b>
<b>City/State/ZIP:</b>	<b>Which Describes Your Organization?</b> For-Profit Corporation: <input type="checkbox"/> 501.C*: <input type="checkbox"/> Government Entity: <input type="checkbox"/>

\*If you have identified your organization as a 501.C, please attach a copy of your IRS determination letter

### Funding

<b>Please Indicate Sponsorship Type Requested:</b> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/>
<b>Describe In-Kind Services Requested:</b>
<b>Total Amount Requested:</b>
<b>Name of the Program/Event:</b>
<b>Describe the Program/Event:</b>

I certify that all figures, facts and representations made in this application, including attachments, are true and correct to the best of my knowledge and that I am empowered to sign on behalf of the applicant organization.

X

Applicant Representative, Date

**About Your Event or Program**

Are you requesting sponsorship for an event or program?  Event  Program

Official name of the event or program: \_\_\_\_\_

Dates(s) of event/program: \_\_\_\_\_

Time(s) and duration of event/program: \_\_\_\_\_

Physical location of the event/program: \_\_\_\_\_

Is this a request for an event/program in the city limits of La Porte or on city-owned property?

Yes  No

Total expected attendance: \_\_\_\_\_

How many hotel stays are expected? If none, answer N/A: \_\_\_\_\_

Total event/program budget: \_\_\_\_\_

\*Please attach the budgeted and actual costs for the event/program the last 2 years.

Who is served by your event or program (Age range, profession, etc.)? \_\_\_\_\_