



Charity Sponsorship Request Profile

Executive Director / Contact Person:

Type of Organization:

Date:

General Information	
Organization Name	
Organization Address	
Organization Phone	

Reason for Financial Request:

Organizational Acknowledgement	Check and Initial	Explanation of Acknowledgement	Received/Verified By Board Member
Registered 501c3	<input type="checkbox"/> _____	Must be a registered 501c3 and supply IRS TIN	
Financials Submitted	<input type="checkbox"/> _____	Financials for Previous Year	
Commit to Marketing	<input type="checkbox"/> _____	Agree to market on Organization Website(s) / FaceBook	
Commit to Event Assistance	<input type="checkbox"/> _____	Agree to assist with event (setup, breakdown, actual event)	
Donations via Wine Event	<input type="checkbox"/> _____	No issue with money being raised by the consumption of wine	
No religious affiliations	<input type="checkbox"/> _____	Not affiliated with religious organizations or charities	

Approved	<input type="checkbox"/> YES <input type="checkbox"/> NO
Suggested Quarter for Event for Year _____	<input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4

Internal Notes:

