



SPONSORSHIP/MONTHLY CHARITY/EVENT/DONATION/MARQUEE REQUEST

Name of Organization

Request Date

Organization Address

City/State/Zip

Contact Name

Contact Phone

Contact E-Mail

Event Date

Event Location

City/State

Organization Tax-ID (If requesting donation)

REQUEST FOR:

SPONSORSHIP [] MONTHLY CHARITY [] EVENT [] DONATION [] MARQUEE []

Comments/display on marquee-date, time, organization, event name, contact number or website

Multiple horizontal lines for entering comments.

TO BE COMPLETED BY PERSON ACCEPTING APPLICATION

[] BANK CUSTOMER

[] BOARD/EMPLOYEE CONNECTION

Bank Customer/Board Employee Connection Name

DECISION/ACTION _____ DATE: _____