

Application for Sponsorship

General Information

Organization Name _____ \$ _____
Amount Requested—\$150 Maximum

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Fax Number _____

Contact Name _____ Title _____

Phone Number (if different than above) _____ Email Address _____

Is your organization exempt from payment of income tax? yes no
(If yes, a copy of form 501 (c)(3) from the Internal Revenue Service must be attached.)

Describe your project or program, and how funds will be distributed: (if more space is required, please attach separate sheet.)

List other sources of funding or requests for funding for this project or program and their status

Funding Source: _____ Amount: _____

Status _____

Funding Source: _____ Amount: _____

Status _____

What criteria does your organization use to measure its programs' effectiveness?

References (Please list other organizations with whom you have partnered for other projects.)

1. _____
City Phone Number

Address City State Zip Code

2. _____
City Phone Number

Address City State Zip Code

3. _____
City Phone Number

Address City State Zip Code

A copy of the organization's most recent financial statement or annual report must accompany this application.

The information contained in this statement is for the purpose of obtaining sponsorship from the Hancock County Arts and Cultural Council (HCACC), on behalf of the undersigned. The undersigned understands that the information provided herein is used in determining sponsorship funding, and the undersigned represents and warrants that the information provided is true and complete, and the HCACC may consider this statement as continuing to be true and correct until a written notice of a change is provided. HCACC is authorized to make all inquiries it deems necessary to verify the accuracy of the statements made herein.

Signature of Organization's Representative

Date