

SPONSORSHIP / DONATION APPLICATION FORM

ORGANISATION/CHARITY/CLUB/COMMITTEE INFORMATION	
Organisation Name:	
Contact Name:	
Email Address:	
Phone Number:	
Are you a Sligo Credit Union member? Ye	s No
Group's social media channels: Facebook Instagram Linke	dln
Please tell us why you are looking for sponsorship. If the sponsorship involves an event, please include details such as the location, estimated numbers, and the expected outcome.	
Please give us a brief synopsis of your organisation:	What category is the event/project? SPORT

SPONSORSHIP/DONATION DETAILS		
Amount Requested:		
Full Sponsorship Partial Sponsorship	Any Donation	
Estimated Event Cost / Required Funding Cost:		
Has your organisation received sponsorship from	Sligo Credit Union in the past? YES / NO	
Is Sligo Credit Union the main sponsor? YES / NO		
Please list other potential sponsors (if applicable)) <u>:</u>	
SLIGO CREDIT UNION SPONSOR	SHIP/DONATION RECOGNITION	
Please describe how we will be recognised as a spused in signage, print materials, website, social nebrochures, testimonial on our website etc.)	oonsor: (Information on how our name will be etwork sites, event launch, banner, event	
I confirm that I have read the Sponsorship, Donati www.sligocu.ie/sponsorship) and agree to the ten the acknowledgment of Sligo Credit Union and pl ing being included on the Sligo Credit Union webs	ms included in the policy specifically regarding hotographs from the Sponsorship/Donation/Fund-	
SLIGO CREDIT UNION OFFICE USE ONLY		
Date Received:		
Amount of Sponsorship: €	Approved Declined	