

# COMMUNITY SPONSORSHIP REQUEST FORM

OAKDALE IRRIGATION DISTRICT



## REQUESTING ORGANIZATION

NAME OF REQUESTING ORGANIZATION:

DATE:

ADDRESS / CITY / STATE / ZIP:

HAS OID SPONSORED YOUR ORGANIZATION IN THE PAST?

YES

NO

MISSION OR PURPOSE OF THE ORGANIZATION:

FEDERAL TAX IDENTIFICATION:

EXEMPT FROM IRS REPORTING?

YES

NO

SELECT THE EXEMPTION STATUS THAT APPLIES TO YOUR ORGANIZATION:

OTHER IRS EXEMPT STATUS:

CONTACT PERSON:

ROLE IN ORGANIZATION:

EMAIL:

PHONE:

## EVENT INFORMATION

EVENT NAME:

*Please attach to this form any pertinent supporting/promotional materials such as event flyers, brochures, registration forms or sponsorship levels/packages.*

DESCRIBE THE PURPOSE OF THE EVENT, ALONG WITH ANY BENEFICIARIES OF THE EVENT:

EVENT DATE:

EVENT HOURS:

EVENT LOCATION:

TOTAL NUMBER OF PEOPLE EXPECTED TO ATTEND/PARTICIPATE IN THE EVENT:

AMOUNT/TYPE OF DONATION BEING REQUESTED:

HOW WILL DISTRICT PARTICIPATION BE RECOGNIZED?

### Statement of Truth and Certification

I hereby declare that the information provided above is true and accurate to the best of my knowledge. I understand that making a false statement or submitting false information may subject me to penalties of perjury under applicable laws.

Requestor's Name / Role in Organization

(please print)

Requestor's Signature

Requestor's Email

Phone

OAKDALE IRRIGATION DISTRICT

EST. 1909

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