

## Donation/Sponsorship Request Form

This form is for requests of \$5,000 or more. For requests under \$5,000, complete the online application for consideration.

Organization Name:			
Date of Application:			
Mailing Address:			
Point of Contact:			
Point of Contact Title/Position:			
Email:			
Phone Number:			
What is your primary branch location?			
Is this organization a member with SeaComm?	Yes	No	
Has this organization been supported by SeaComm in the last 12 months? Yes No If so, please detail and provide dates.			
Name of Project or Publication:			
Date of Project or Publication:			
Projected Impact Numbers:  (i.e. How many people will attend the event, how many people will receive the publication, etc)			

