



MEQUON
THIENSVILLE
COMMUNITY FOUNDATION

MEQUON-THIENSVILLE COMMUNITY FOUNDATION
SPONSORSHIP APPLICATION

ORGANIZATIONAL INFORMATION

Organization Name _____

Address _____

City _____ State _____ Zip _____

Contact Person _____

Phone _____

Email address _____

Website address _____

Mission Statement

Does your organization provide volunteer opportunities? Yes/No (please circle)

If so, how many volunteers did you have last year? _____

Has this request been authorized by the organization's governing board? Yes or No (please circle)

If yes, when? _____

Has your governing board approved a policy of non-discrimination with regard to age, race, religion, sex or national origin? _Yes or No (please circle) If yes, when? _____

PROJECT DETAILS

What is the date of the event? _____

What is the location of your event? _____

How many individuals will benefit from your event? _____

Please provide a concise 3 – 5 sentence description of your event:

How does your event align with the mission of the Mequon-Thiensville Community Foundation?
3 – 5 sentences [or how does this event meet the sponsorship guidelines]?

FUNDING

Amount requested from Mequon -Thiensville Community Foundation?

Please attach any other information about sponsorship levels and the event to help us make the decision.

Please email the completed application and attachments to
info@mtcfgives.org or mail to
Mequon-Thiensville Community Foundation
PO Box 52
Mequon, WI 53092

Questions? Call 262-238-3803 or email info@mtcfgives.org