



Application for Donation OR Request for Sponsorship

PenFinancial Credit Union gladly accepts requests from organizations/groups that reside within our communities which includes the Niagara Region.

This application must be completed for ALL DONATION/SPONSORSHIP REQUESTS IN EXCESS OF \$100.00. Please review our Donation/Sponsorship policy in order to ensure that your request will be considered.

Please complete all applicable information as it relates to your request i.e. requests for sports team sponsorships of course are not considered an event however, please note as much information as is possible

Date: _____ Phone #: _____

Organization Name: _____

Contact Person: _____ Title: _____

Charitable Tax # (if applicable): _____

Organization Background (i.e. date established, mandate etc.): _____

Do you operate a nonprofit organization account at PenFinancial? Yes No

If yes, Account #: _____ Branch: _____

Has your organization received support from PenFinancial Credit Union in the past? If so, please list for what and when: _____

Amount of Donation/Sponsorship Requested: _____

Date of event: _____ Location of event: _____

When is the Credit Union donation/sponsorship required: _____

For consideration, your request must be received at least 30 days in advance of the event or when the funding is required – special circumstances will be considered on an individual basis.

Are there other ways the Credit Union might help in lieu of or in addition to a cash donation/sponsorship? _____

What will the funds requested be used for? Provide a brief description of the event, its goals and the purpose of funding: _____

How does the community benefit from this event (i.e. educational, safety, etc.)?: _____

Support materials are being mailed/dropped off to the Corporate Office Yes No

Could PenFinancial Credit Union employees be involved in this event and if so, how?

What does PenFinancial Credit Union receive in terms of recognition for the donation/sponsorship? _____

What are the publicity plans for this event and how will PenFinancial benefit?

Are there other organizations or sponsors involved? If so, please list them: _____

Who and how many people will participate in or benefit from your event? _____

Are any staff, Committee members or Board of PenFinancial Credit Union affiliated with your organization? Yes No

If yes, in what capacity? _____

Please use this opportunity to note any other information you feel would be of assistance when considering your request.

If your application is approved, please indicate who we should make the cheque payable to and the address in which to send the funds.

This application may be submitted on-line, faxed to (905) 735-2983 or mailed to:

PenFinancial Credit Union
Attn: Marketing & Business Development Manager
247 East Main Street
Welland, ON
L3B 3X1