







## **Donation & Sponsorship APPLICATION FORM**

When preparing your proposal, please ensure that all questions below have been answered. Due to the volume of requests we receive, please allow up to 2 weeks for us to respond. For donation requests of \$1,000 or more, please ensure you submit your application a minimum of one month in advance to ensure all submissions are reviewed in a timely manner.

Organization Name:	
Category of Organization: Health & Wellness Sp Community Non-Profit Other If other, please sp	ports and Recreation Arts & Culture Youth Education secify
Organization's Mailing Address:	
Town:	Postal Code:
Mission/purpose of organization:	
Contact Person:	
Position/Title:	<del></del>
Contact Person's Daytime Phone:	
Contact Person's Email:	
Project/Event Name:	
Date of Project/Event (if applicable):	
_ Type of Support Requested (i.e. gift card, doo	r prize, etc):

Please give a brief description of your request (i.e. what the donation will be used for, type of event, etc):						

Thank you for your application. Applications to be directed to our Marketing Coordinator, Roxan Foursha at <a href="mailto:roxan.foursha@westernsales.ca">roxan.foursha@westernsales.ca</a>