

SPONSORSHIP REQUEST FORM



Applicants requesting a sponsorship must complete this form, attach all required documentation, and be submitted to the Tribal Secretary's Office. **Applications are due by the 1st of each month** (requests received after the deadline will be processed in the next month). The Tribe cannot guarantee that all requests will be approved and that an approval does not guarantee future requests will be approved. Applicants cannot request both a donation and sponsorship for the same event.

APPLICANT INFORMATION

Applicant Name _____ **EIN/SSN:** _____

Mailing Address _____ **Phone No.** _____

Affiliation FPST Member or Entity Local Community Organization
 Other Indian or Tribal Entity Other: _____

SPONSORSHIP INFORMATION

Event Name _____

Date(s) _____ **Location:** _____

Prior Requests Yes No If "Yes" when: _____

Identify the area of consideration that this sponsorship request falls into (mark all that are applicable):

- Nutrition and Health
- Cultural and Diversity Programs (youth/elders)
- Literacy & Mentoring
- Functions conducted by Tribe Tribal Members
- Arts/Cultural functions
- Safety/Security of the FPST Tribal Communities
- Sports & Recreation
- Preventative and Educational Programs
- Other (explain): _____

ACTIVITY DESCRIPTION. In the box, below, provide a description of your activity (event), a brief description of the history of the event and your organization (if applicable), and how the sponsoring funds will be used.

SPONSORSHIP BENEFITS TO THE TRIBE

Identify any **IN-KIND** Benefits to the Tribe from this sponsorship:

Benefit		Details
Tickets/ Hospitality	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Speaking rights at relevant programs	<input type="checkbox"/> YES <input type="checkbox"/> NO	(provide details of public speaking opportunities for tribal officials/employees)
Acknowledgement as a Sponsor	<input type="checkbox"/> YES <input type="checkbox"/> NO	(in newsletters, newspapers, on signage and banners, programs, flyers, etc.)
Other (explain in detail)	<input type="checkbox"/> YES <input type="checkbox"/> NO	

Identify any **MEDIA AND MARKETING** benefits to the Tribe from this sponsorship:

Benefit		Details
Media releases	<input type="checkbox"/> YES <input type="checkbox"/> NO	(targeting radio/TV/press etc.)
Direct Mail	<input type="checkbox"/> YES <input type="checkbox"/> NO	(length, time, number, frequency etc.)
Media Ad's (TV, radio, newspaper)	<input type="checkbox"/> YES <input type="checkbox"/> NO	(length, time, number, frequency etc.)
Website & Social Media	<input type="checkbox"/> YES <input type="checkbox"/> NO	(banner, site ads etc.)
Other (explain in detail)	<input type="checkbox"/> YES <input type="checkbox"/> NO	

FUNDRAISING AND OTHER SPONSORSHIPS

Complete the table below on information on any fundraising and/or other sponsorships that has been done and/or pledged for this activity (attach additional sheets if necessary).

List Fundraising and/or Other Sponsorships	Supporting Information & Details	Total Amount
		\$
		\$
TOTAL FUNDRAISING & OTHER SPONSORSHIPS AMOUNTS:		\$

