

# Application for Financial Sponsorship West Fargo Exchange Club

1. Organization/Applicant Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Number of people that would benefit from this donation: \_\_\_\_\_

3. Mission of application/organization: \_\_\_\_\_

4. Amount requested: \$ \_\_\_\_\_  
Please include itemized list of potential expenses; motel, travel, food, etc

5. Purpose of request: \_\_\_\_\_

6. Date of Event: \_\_\_\_\_

7. Are you making efforts to obtain funds through other means? Yes or No  
If yes, please list: \_\_\_\_\_

8. What is your association with the city of West Fargo; WF resident, WF non-profit organization, WF school(s): \_\_\_\_\_

9. Have we given funds to you in the past? Yes or No  
If yes, for what purpose and how much was the donation? \_\_\_\_\_

10. Would there be an opportunity for the WF Exchange Club to receive publicity for this donation?  
Yes or No What form of publicity if any? \_\_\_\_\_

Our next board meeting will be the 2nd Tuesday of the month. For a prompt response to your request, please deliver this application to the WF Exchange Club by the 1st of the month.

If we choose to provide you with your request, would you do us the pleasure of reporting to the West Fargo Exchange Club after your event? Yes or No.

Approved for \$ \_\_\_\_\_

Denied

Official Use Only

Board of Director Signature: \_\_\_\_\_