



# Sponsorship/Donation Request Form

## City of Munford

1397 Munford Avenue

Munford, TN 38058

Phone: 901/837-0171

www.munford.com

*complete all applicable fields and deliver or mail to City Hall, attention of Barbara Dorn*

Name of event: \_\_\_\_\_

Date(s) of event: \_\_\_\_\_ Amount requested: \_\_\_\_\_

Has the event been sponsored by the City of Munford before? Check one:  Yes  No

Is the event in Munford? Check one:  Yes  No

What organization is benefiting from the event? \_\_\_\_\_

What is the physical address of the benefiting organization? \_\_\_\_\_

What is the mailing address of the benefiting organization? \_\_\_\_\_

City / Zip \_\_\_\_\_

Name of person submitting request? \_\_\_\_\_

Phone number? \_\_\_\_\_ Email address? \_\_\_\_\_

Is the benefiting organization a City of Munford utilities customer? Check one:  Yes  No

Can the name or logo of the City of Munford appear at the event? Check one:  Yes  No

Describe the sponsorship opportunities and benefits to the City of Munford: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the main source of funding for this Event? \_\_\_\_\_

What other funds are available to you for this Event? \_\_\_\_\_

\_\_\_\_\_

How many people are expected to be at the event? \_\_\_\_\_

Will Media be at the event? Check one:  Yes Which? \_\_\_\_\_

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\_\_\_\_ No

Will City of Munford employees or family of employees be participating in the event? Check one: \_\_\_\_ Yes \_\_\_\_ No

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**Internal Use Only**

Approved Amount: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

GL# Assigned: \_\_\_\_\_

Mayor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_