

## Form For Request PDF

Please provide all copy regarding the Community Commitment **Form For Request** that you would like to appear on the PDF.

### **Shoe Fly Community Sponsorship Proposal:**

Company or Organization: \_\_\_\_\_

Contact First Name: \_\_\_\_\_

Contact Last Name: \_\_\_\_\_

EIN #: \_\_\_\_\_

501(c)(3) status: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

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

Contact Email: \_\_\_\_\_

Organization Website: \_\_\_\_\_

What Shoe Fly location is closest to your organization ? \_\_\_\_\_

Has your organization received prior support from Shoe Fly ?

When: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Tell us about your program or event:

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

Purpose of Support:

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

How will the funds raised for the program or event be used ?

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

Date and Time of program or event ? \_\_\_\_\_

Location of program or event ? \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_