



# Community Support Application

Complete this application and submit to [schavez@tbtc.net](mailto:schavez@tbtc.net) along with your W-9 at least 30 days prior to your event.

Organization/group name: \_\_\_\_\_ Federal Tax ID Number: \_\_\_\_\_

Do you have a 501 (c) 3 non-profit certification? Yes  No

Contact name: \_\_\_\_\_ Contact title: \_\_\_\_\_

Organization address: \_\_\_\_\_ City/state/zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Please describe the purpose of your organization and its primary beneficiaries: \_\_\_\_\_

## PROGRAM/EVENT INFORMATION (COMPLETE WHERE APPLICABLE)

Program/event: \_\_\_\_\_ Event date: \_\_\_\_\_

Is there a print deadline? Yes  No  Do you need TBTC logos or Ads? Yes  No   
If yes, what is the date? \_\_\_\_\_ If yes, please specify? \_\_\_\_\_

How many people are expected at your event? \_\_\_\_\_

What cities or countries will be served? \_\_\_\_\_

Please describe the nature and purpose of you program and event: \_\_\_\_\_

## REQUEST INFORMATION

What would you like TBTC to donate? (Please be as specific as possible): \_\_\_\_\_

Has TBTC donated to your organization's program or event in the past? Yes  No   
If yes, what amount and date? \_\_\_\_\_

Has TBTC already made a contribution to your program or event? Yes  No   
If yes, what amount and date? \_\_\_\_\_

Our customers like to know how we support our community. How will TBTC be recognized as a sponsor of the organization/program/event? \_\_\_\_\_