

| Type or Print clearly in BLACK ink. Application Date: Organization Details | | December to be considered for the next | | |
|--|-----------------|--|-------------------|-----------------------|
| | | year. Late entries will be taken into consideration under the discretion of the BoD. | | |
| | | | | Name of Organization: |
| Contact Person in the Organization: | First Name | | Last Name | |
| Address: Street Address | | | | |
| City | | State / Province | Postal / Zip Code | |
| Phone: | E-ma | il: | | |
| Area Code – Phone Numi (ex.: 555-555) | ber | E-mail (ex.: myname@ | example.com) | |
| Website Address: | | | | |
| Project or Event Informa | etion | | | |
| Project/Event Name: | | | | |
| Start Date: | | End Date: | | |
| | Sponsorship pr | oposal | | |
| | Gift-in-kind do | nation | | |
| Sponsorship Request Type: | Cash donation | | | |
| | Publicity event | | | |
| | Speaking engag | gement opportunity | | |

| Provide a brief description of the project/event: | | |
|---|--|--|
| What are the goals and objectives of the project/event? | | |
| Provide an audit or analysis on the usage of the funds: | | |

| Please elaborate on why should we sponsor your project/event: | | |
|---|---|--|
| Sponsorship Packages: | □ Sponsorship Platinum Level \$300.00 □ Sponsorship Gold Level \$200.00 □ Sponsorship Silver Level \$100.00 □ Sponsorship Bronze Level \$50.00 □ Other (please specify): \$ Total \$: | |
| Unit Commander's Signa | nture: | |
| Print Full Name: | | |
| Unit Comptroller's Signa Print Full Name: | nture: | |
| | | |

Please e-mail this completed sponsorship application to LTC CJ Rodriguez Hernandez at cj.rodriguezh@hotmail.com
or mail to PO Box 1370, Leander, TX 78646