

The Port St Lucie Business Women (PSLBW) seeks to sponsor key non-profit organizations that benefit and/or serve the St. Lucie County community or promotes Port St. Lucie Business Women as an organization.

SPONSORSHIP GUIDELINES

PSLBW sponsorships may take a variety of forms, including but not limited, to:

- Financial sponsorship of community events intended to promote the interests of women and/or children. (example: a community walk)
- Sponsorship of a local event which may include admission tickets or a display table (which should
 include recognition of the sponsorship at the venue and event advertising).
- Providing specific elements for an event or major program, (e.g., hosting a breakfast meeting at a conference).
- Participating in local community or business events at which the honoree is a PSLBW member.
- Participating in events that provide positive public relations for PSLBW or its fundraising efforts.

Qualification Criteria

- Sponsorship requests must be submitted and signed by a PSLBW member who is an advocate of the event or organization.
- The maximum amount provided shall not exceed \$500.00.
- An organization may receive only one (1) sponsorship in a calendar year.
- The PSLBW membership reserves the right to grant or deny a sponsorship or to offer a lower sponsorship level than requested. A submitted application does not imply that an organization will receive a sponsorship.

SPONSORSHIP RECOMMENDATION

Instructions

- Please read the attached Sponsorship Guidelines.
- Answer each question in the space provided. Attach additional sheets if needed.
- Please attach a copy of the sponsorship form/event flyer, if applicable.
- Sign and date the application, and return the completed application at least 60 days prior to the event date to the Chair of the Community Actions and Grants Committee at grants@pslbw.com
- All sponsorship requests are due by October 30th.

Applicant Information

Organization				
Name				
Address				
City	County	State	Zip Code	
Website		1	l l	
Nonprofit EIN:				
Organization Rep	resentative/Contact			
Name and Title:				
Contact Number:				
Email Address:				
Brief Description of Organization and Mission Statement				

Event Information

Title and Brief Description of Event:		
Date(s) of Event:		
Dollar Amount Requested:	Number of Anticipated Attendees:	
Location/Geographic Area Covered by Event:		
Funds: What will the funds raised by this event be us	ed for?	
Purpose: How does this event benefit women and/or	r children?	
PSLBW participation : How will the PSLBW be recogn member volunteer opportunities)	ized as a sponsor? (i.e. table seating, signage, speaker,	
Need : Why is this event important to our community	<u>1?</u>	
Signature of Sponsoring PSLBW Member		
Signature:	Date:	
Printed Name	Contact Number	