



Event or Sponsorship Request Form

Date of Request _____

School Name _____

School Address _____

City _____ State _____ Zip _____

Teacher or Principal Contact Name _____

Phone _____ Email _____

Requesting assistance for: (check the appropriate box)

School Event/Classroom Activity Event Date _____ Time _____

Event Name _____

Describe how you would like us to participate in your event (presentation, activity, game, booth, etc.)

Sponsorship _____ Amount of Request \$ _____
(\$500.00 maximum)

Make check payable to (school/organization): _____

Describe how the sponsorship funds will be used: _____

Door Prize Silent Auction Item Other _____

Please describe how TRUE Community will be recognized for our contribution to your event or sponsorship, etc. (signage or mentions during event, publications and/or social media)

Please return this completed request to your TRUE Community Education Coordinator, fax to 517-784-6677 **Attn: Financial Education Department**, or email to save@TRUECCU.com

Requests will be reviewed and approved or declined by the TRUE Community Credit Union Financial Education Manager or Chief Community Impact Officer. Approval of request will be based on one or more of the following: number of applications received, resources available, time availability of the TRUE Community Education team, relevance of the request to financial education efforts, and potential impact on students.

For TRUECCU Use Only:

Date Received _____ Request Approved _____ Amount \$ _____

Declined ____ Reason _____

Representative(s) Assigned _____

Authorized Signature _____