Minot SERTOMA Club

Application for Community Donation or Sponsorship Support

(Under $500)

Date Needed: _____ ☐ Sponsorship Request ☐ Donation Request

Note: Submission of this application does not guarantee funding. Requests will be reviewed by the Minot Sertoma Club and evaluated based on community impact, alignment with Sertoma's mission, available funding, and sponsorship opportunities. Applications are reviewed once monthly at Minot Sertoma Club Board Meetings. No requests will be approved without proper club authorization per club bylaws. Minot Sertoma Club is unable to sponsor or donate to individuals.

Name of Organization _____

City/State/Zip _____

Phone Number _____

Contact Person _____

Phone Number _____

Email _____

Event or Program Name _____

Date(s) and Location _____

Amount Requested $ _____

Has Sertoma sponsored this event or organization before? ☐ Yes ☐ No If yes, when? _____

Does your agency or organization serve the Minot area? ☐ Yes ☐ No

If yes, number of individuals, families or groups served in the area in the last year. _____

_____

What is your organization's purpose, mission, and how will the requested support benefit the community? _____

_____

_____

How does this request support community service, education, health, hearing, youth, or other community-focused initiatives? _____

_____

Why is this request important to the Minot community, and why should Minot Sertoma Club support it? _____

_____

_____

Please list confirmed and anticipated sources of funding, sponsorships, donations, grants, or other revenue associated with this project, event, or request. _____

_____

Please provide a project budget, quote, estimate, invoice, or sponsorship package showing how funds will be used.

_____

- Please include your 501(c)(3) letter from the IRS if applying for a charitable donation.
- Financial statements may be requested if applicable.

If requesting sponsorship, please provide the sponsorship opportunity and benefits offered to Sertoma of Minot (examples: logo placement, event recognition, promotional opportunities, signage, social media mentions, etc.).

- Expected event attendance_____
- Participants served _____
- Social media reach (if applicable)_____

If full funding cannot be provided, would partial funding be helpful? ☐ Yes ☐ No

If yes, what is the minimum amount needed for this project or request to proceed? $ _____

Signature of Applicant _____

Title in Organization or Agency_____

Date _____