

City of Denton

SPONSORSHIP APPLICATION

FISCAL YEAR 20243-20254

COMPLETE APPLICATIONS INCLUDING EXHIBITS ARE DUE ON OR BEFORE

July 14, 2023 May 24, 2024

NO APPLICATION WILL_WILL BE ACCEPTED AFTER THE DEADLINE

SUBMIT TO

City of Denton Attn: Daniel Jones 215 E. McKinney Denton, TX 76201

or

EMAIL TO

daniel.jones@cityofdenton.com

Applications must be in PDF format (no more than 4 PDFs) and attached in print ready order.

INCOMPLETE APPLICATIONS WILL NOT BE FORWARDED TO THE COMMITTEE

Organization Name:		
Name of Event:		
Physical Address of the Event:		
Mailing Address:		
Telephone:	-	
Website Address:		
Primary Contact Name:		
Title:	Telephone:	
Email:		
Secondary Contact Name:		
Title:	Telephone:	
Email:		

If you are applying on behalf of another organization, please provide contact information for that organization:

Organization:		Contact Name:			
Pho	one:	Email:			
Complete the following questions regarding your request for City sponsorship consideratio					
	ent Date:				
	ent Date: t be between October 1, 202 <u>4</u> 2 – September 30, 202 <u>5</u> 4				

(submit Exhibit E)

2) Briefly state your organization's mission and purpose.

In-Kind Sponsorship (specify in question 6)

Cash Sponsorship Amount Requested: \$_

3) Describe the event in which funds are being requested to support.

4) Explain how your organization and/or event further furthers a charitable cause, economic or community growth, or serve serves a public interest?

5) Provide detail on how the requested funds will be used to support the event partially or in full.

- 6) Select all in-kind services the organization is requesting for the event: In-kind sponsorship requests will be reviewed by staff and assessed a value based on set fees and current costs.
 - a) Park and facilities fees (up to 50%)
 - b) Park Personnel (maintenance and building attendants)
 - c) Park materials and supplies
 - d) Police Personnel
 - e) Fire Personnel
 - f) Solid Waste services
 - g) Other services not listed (please specify)_____
 - h) Not requesting in-kind services
- 7) If the total requested funding is not received, what will the organization do?
 - a) Cancel the event
 - b) Postpone the event
 - c) Downsize the event
 - d) Fundraise for the event
 - e) Look for other funding sources
 - f) Other (please specify)_
 - g) No major event impacts will occur if funding is not received
- 8) Identify and provide the status of all other funding requests for this event. Provide attachment if needed.

Source	Pending	Approved	Dollar Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$

9) Provide three years attendance and anticipated attendance for the event, program, or exhibition that funds will support.

Anticipated attendance ______ Historical attendance:

Event Name and Year	Attendance

No

10)11) Explain in detail how the event, program, or exhibition marketing plan will promote the City of Denton. Include all marketing platforms that will be used.

Exhibit B Provide the organization's last two years' audited financials or balance sheet and income and expense statements. Exhibit C Most recent form 990 submitted to the Internal Revenue Service. **Exhibit D** Proof of "Active" status as a non-profit Texas corporation as reflected on state comptroller's website. <u>https://mycpa.cpa.state.tx.us/coa/</u> Exhibit E Line-item budget totaling requested amount-in question 1at top of page. *Use budget template on City website. Exhibit F List of current board of directors including addresses.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

NO APPLICATION WILL BE ACCEPTED AFTER THE DEADLINE

The information provided in this application is for the purpose of obtaining sponsorship funding from the City of Denton on behalf of the undersigned. Each undersigned representative warrants the information provided within this application and its attachments are true and complete until a written notice of change is provided to the city of Denton. The City of Denton is authorized to make all inquiries deemed necessary to verify the accuracy of the provided information.

President/Chairman's Signature

Printed Name of Above Signer

Printed Name of Above Signer

Secretary/Treasurer's signature

Date

Date

Exhibit A Letter of determination certifying federal tax-exempt status under the Internal Revenue code.