



## 802 Credit Union Donation & Sponsorship Request Form

Giving back to the community is an essential part of our business. We want to support organizations that help better the community in which we are all a part of.

To ensure that your request is processed in a timely fashion, please allow at least two weeks notice.

Name of Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Role in Organization: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Brief description of organization's mission:

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Date of Event: \_\_\_\_\_ Date Donation Needed: \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_

Donation Request: \_\_\_\_\_

Brief summary of how donation would be used:

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Solicitor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

**Please mail completed forms to:**

802 Credit Union  
Attention: Marketing  
34 Clinton St.  
Springfield, VT 05156

**Or email to:**  
marketingdept@802cu.com