



# TRUCKEE TAHOE AIRPORT DISTRICT Community Sponsorship Request Form

Non-Profit Organization/Group: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Name of Authorized Representative: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Complete mailing address: \_\_\_\_\_

\_\_\_\_\_

501(c)(3) Status: \_\_\_\_\_ Y / N Federal Tax ID # (Include copy of IRS determination letter): \_\_\_\_\_

Phone - Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_ Fax: \_\_\_\_\_

Policy Instruction 311 Eligibility Criteria: \_\_\_\_\_

Please provide a detailed description of your Sponsorship Request and how it will benefit your organization, and the Truckee Tahoe Airport District. (Use additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ (A specific dollar amount from \$1 - \$5,000 must be entered)

Have you requested funding from TTAD before? \_\_\_\_\_ Y / N If "Yes" – when? \_\_\_\_\_

How will the District be recognized in your program? (Use additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List funding sponsors/partners and amounts that have been received within the last year. (Use additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What fund raising activities or programs did your organization hold within the last year? (Use additional sheets as necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature (Authorized Rep.): \_\_\_\_\_ Date: \_\_\_\_\_

**Please allow 60-90 days for your request to be reviewed and processed.**

.....