



Community Contributions Special Event Sponsorship Application

Please review the guidelines before completing this application. *Sponsorships are limited to special events within City limits. Applications are DUE Feb. 1. Please submit this form by email to: contributions@moabcity.org.*

Organizational Information

Full Legal Name of Requesting Organization: _____
 Common Name of Organization: _____
 Street and Mailing Address (if different) _____ City: _____ Zip: _____
 Chief Executive's Name, Title, phone and email: _____
 Contact Name: _____ Phone number: _____ Email _____
 Is your organization a 501(c)(3) nonprofit? Yes No If not, explain your nonprofit status. _____
 Year organization incorporated: _____ Number of full-time-equivalent paid staff: _____ Number of volunteers: _____

Special Event Information

Name of Special Event for which you are requesting funds: _____
 Project Leader: _____
 Approximate number of people expected to attend this event: _____
 Duration of event (one-time or annual): _____
 Please describe how the community will benefit from this City Sponsorship (in 100 words or less): _____

Do you charge admission or a fee for this special event? Yes No Fee: \$ _____
 What are the expected net proceeds and overhead costs for this event? _____

Financial Information

For this special event sponsorship, dollar amount requested: \$ _____
 How will these funds be used? _____
 Total Project Overhead (from table below): \$ _____
 Date funds are needed (must be used within one year of award date): _____

In the table below, please describe your overall budget for this special event.

Expense Category	Approximate Cost
Personnel	
Equipment	
Other (advertising, etc.)	
TOTAL EVENT OVERHEAD:	

Has your organization received funding from the City of Moab in the past two years, including fee waivers and in-kind donations? Yes No. If yes, please describe: _____

Has your organization received other funding for this event? Yes No If yes, please describe: _____