



VISIT MARSHALL COUNTY SPONSORSHIP REQUEST FORM

Name of Organization _____ Date _____

Address _____ City _____ Zip _____

Contact Name _____ Phone _____

Contact Email _____

Name of Event _____ Date of Event _____

Location of Event _____ Anticipated Attendance _____

How many years has this event existed? _____

Purpose of Event _____

Type of support requested: _____ financial _____ employee involvement _____ other (please explain)

Requested Sponsorship Amount: _____ Deadline for Support _____

Please attach the following documents with your request if available:

- Cover letter
- Event descriptor and levels of sponsorship available
- Sponsorship Commitment Form for us to fill out and send with funding
- Contact person and mailing address

If you have any questions, please contact jbeatty@visitmarshallcounty.org.