



AMISKUSEES
SEMAGANIS WORME
FAMILY FOUNDATION

APPLICATION FOR SPONSORSHIP

(INDIVIDUAL OR GROUP)

Project or Event

NAME (PROJECT/EVENT/INDIVIDUAL)

DATE(S) OF EVENT

LOCATION OF EVENT

DESCRIPTION OF EVENT

IS THIS AN ABORIGINAL EVENT/INITIATIVE?

WHAT IS THE PRIMARY FOCUS OF YOUR REQUEST?

- | | |
|-------------------|--------------------------|
| Youth | <input type="checkbox"/> |
| Education | <input type="checkbox"/> |
| Culture | <input type="checkbox"/> |
| Health & Wellness | <input type="checkbox"/> |
| Community | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

Please indicate: _____

Contact Information

NAME	
ADDRESS	
POSTAL CODE	
PHONE #	
FAX #	
CELL #	
EMAIL	
WEBSITE	

SHOULD YOUR REQUEST BE APPROVED, WHO SHOULD THE CHEQUE BE PAYABLE TO:

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Project Information

AMOUNT REQUESTED	
HOW WILL THE MONEY BE PRIMARILY USED? (All applications must submit a budget otherwise the application will be deemed incomplete & will not be considered for support)	
DO YOU HAVE ANY OTHER SPONSORS?	

WILL YOU/YOUR GROUP BE CONTRIBUTING TO THIS PROJECT? HOW?

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Sponsorship

IF YOU RECEIVE SPONSORSHIP HOW WILL YOU PROMOTE AMISKUSEES: SEMAGANIS WORME FAMILY FOUNDATION?

Submit

PLEASE SUBMIT THIS APPLICATION TO

Address: Suite 300 - 203 Packham Avenue
Saskatoon, SK
S7N 4K5

Fax: 306-664-7176

Email: amiskusees.swff@sasktel.net

NOTE: Please allow 6-8 weeks lead time from the date of submission to your scheduled event.