

Caras Park Pavilion Sponsorship Request Form

Name of Event: _____

Organization: _____ MDA Member: ____ Yes ____ No*

Organizational Director: _____

Event Organizer: _____

Phone Number and Fax Number: _____

Address: _____

Sponsorship Criteria

1. Nonprofit Organization? (circle one) YES NO Tax ID# _____

2. Event Date and Time: _____ Expected Attendance: _____

3. Event Summary: _____

4. Purpose of Event: _____

5. Event Format: _____

6. Why does this event deserve sponsorship? _____

7. Marketing Plan – How will the MDA be promoted? _____

*The MDA reserves the right to be more favorable in granting sponsorships to MDA members.

Mail or fax this form by **Friday, January 27, 2012**
Missoula Downtown Association
218 E. Main St, Ste C
Missoula, MT 59802
Phone: (406) 543-4238
Fax: (406) 543-9831

For MDA Office Use Only:

Approved: _____
Denied: _____
Rationale: _____