



# MACHENS.COM

## DEALERSHIP SPONSORSHIP REQUEST FORM

This form along with any supporting documentation should be completed and returned to 1180 Vandiver Drive, Columbia, Missouri 65202, Attn: Sponsorships or emailed to sponsorships@machens.com. Due to the large number of requests, Joe Machens Dealerships and Columbia Honda are unable to guarantee a response to all donation requests. If your sponsorship is approved, we will require a W-9 from your organization.

Today's Date: \_\_\_\_\_

**ORGANIZATION INFORMATION**

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Contact Email

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Title or Relationship to Organization

Are you a customer of Joe Machens Dealerships: Y / N Which Location? \_\_\_\_\_

Have you previously spoken to anyone at Machens about this sponsorship opportunity? Y / N

If Yes, Who? \_\_\_\_\_

**PROGRAM/EVENT INFORMATION**

\_\_\_\_\_  
Program or Event Name

\_\_\_\_\_  
Funding Deadline

\_\_\_\_\_  
Purpose of support and how the funds will be used.  
\_\_\_\_\_

\_\_\_\_\_  
Area/Community the program will serve

\_\_\_\_\_  
Date of Program/Event

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**PLEASE SUBMIT ALL REQUESTS AT LEAST 4-6 WEEKS IN ADVANCE OF FUNDING DEADLINE**

**FOR OFFICE USE ONLY**

Date: \_\_\_\_\_ Donation Amount: \_\_\_\_\_  Charity Fund Check Request  
 Approved  Declined Fiscal Year: \_\_\_\_\_  TDA Request  
Authorized By: \_\_\_\_\_  Store: \_\_\_\_\_