

## DONATION/SPONSORSHIP REQUEST FORM

## Tell us about your organization:

Organization Name:		Tax ID:	
Address:		Phone:	
Contact Person:			
Phone:		Email:	
Request:			
Is Your Organization?			
A 501(c)3 organization (non-profit)?		□Yes □No	
A local chapter of a national charity?		□Yes □No	
A customer of Baybank?		□Yes □No	
Will the contribution benefit any of the listed purposes?			
<ul> <li>Health</li> <li>Education</li> <li>Community Service</li> </ul>	<ul> <li>☐Youth Activities</li> <li>☐Cultural Activities</li> <li>☐Special Community</li> <li>Projects</li> </ul>	□ Financial Literacy	

## List any Baybank employees who volunteer for your organization:

Priority will be given to organizations that foster growth and development within the communities we support. A decision to deny a request does not imply that the applicant's program is not needed or worthy, but simply that it does not fall within our giving guidelines, priorities, or that funds are not available.

Baybank Marketing Department P.O. Box 191 Gladstone, MI 49837