WESTERNPORT WATER



## Sponsorship Application Form

Event / Activity Type:		
Arts and Culture	Education	
Charity / Welfare	Health	
Community Organisation	Sport	
Other (Please specify)		
Organisation Name:		

## Address:

<u>ABN</u>

GST Registration Status:	Registered for GST
	Not Registered for GST
Telephone Number:	
Fax:	
Contact Person & Position Title:	
Name of Event:	
Date and Duration of Event:	

Target Market(s) for the Event:	
Goals to be Satisfied by the Event:	
The Marketing Message to be	
Communicated by the Event:	
Nature of the Sponsorship Requested:	
Frequency of Sponsorship	
Commitment:	
Number of Sponsors Sought for this	
Event (please include names of all	
organisations approached):	
Please Provide Details of any	
Sponsorship that has already been	
Confirmed for this Event:	
Names and contact details of Referees	
who may confirm your ability to	
successfully run the Event.	
Will Westernport Water's Logo Appear	Westernport Water's logo will / will not appear in any advertising
in any Advertising or Promotion of this	or promotion of this event.
Event?	
PLEASE NOTE:	
Prior to any use of the Westernport Water logo, a Use of Logo Application Form must be	
submitted for approval.	

List all charities or community groups		
that will benefit from or receive		
proceeds or profits.		
Please use this space to provide any further information that may help your application:		

Sponsorship Application form must be completed and returned with any supporting material to:

COMMUNICATIONS & MEDIA MANAGER WESTERNPORT WATER 2 BOYS HOME ROAD NEWHAVEN VIC 3925

All enquiries to:

CUSTOMER SERVICES MANAGER Phone: (03) 5956 4114 Fax: (03) 5956 4101

Office Use Only

Application Approved:

Yes/No

Justification:

Signature:

Date: