



Request for Donation/Support Form

<p>Name of organization: _____</p> <p>Address: _____</p> <p>_____</p> <p>Telephone Number: _____</p> <p>Fax Number: _____</p> <p>Email Address: _____</p> <p>Contact Person: _____</p>
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See BWMC's Guidelines for Support of Community Organizations for Specific Criteria for Sponsorships and Donation Requests and Types of Requests Suitable for Funding.

What level of funding are you requesting? When is the funding needed?

What in-kind contributions are you requesting? How Many? When are they needed?

Will recognition be given to BWMC as a sponsor? If so, how, when and where?

How will the funding be used? In-kind contributions?

What is the market reach of your organization? How is the service or event being advertised or communicated to community or target audience?

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(Continued)*

What are the demographics of your service recipients?

How are your services delivered in the community?

How do you feel that your organization is in alignment with BWMC's mission and goals?

Other comments that you feel may aid in your request for charitable support:

All contribution requests must be submitted in writing and sent to:

Mary Lanham
BWMC
301 Hospital Drive
Glen Burnie, MD 21061
mlanham@bwmc.umms.org