

Fairview Range Sponsorship/Donation Request Form

Charitable contributions, sponsorships and community events must be aligned with Fairview's mission to heal, discover and educate for longer, healthier lives and our strategic priorities and business goals.

Definitions:

Charitable contributions are gifts of cash or physical assets (e.g. supplies or promotional items) made to non-profit organizations outside of Fairview to be used for various charitable activities. These donations are made with no expectation of tangible benefit.

Sponsorships are cash donations made to an event organized by non-profit groups in the community. The participation fees are typically in excess of the tangible benefits received.

Community events are health or community activities provided or supported by Fairview within our designated service areas. Such activities would include event sponsorships, health fairs, drug awareness events and other health education classes offered.

Note: Certain groups or requests will automatically be ineligible such as:

- Political activities
- Scholarships
- Individual requests

Instructions:

Please complete the application as thoroughly as possible and attach the requested information. Requests must be received at least 8 weeks in advance of the event/activity. If you have any questions please call Fairview Range Marketing at 218-362-6771.

Please send completed application and attachments to:

marketing@range.fairview.org

Or mail to:

Fairview Range
Marketing & Public Relations
750 E 34th Street
Hibbing, MN 55746

Name of organization/event: _____

Website: _____

Is the organization a non-profit? YES NO Tax ID number: _____

What type of request: Charitable Contribution Sponsorship Community Event

Date of event: _____ Projected attendance: _____

Date you need the contribution (*allow 8 weeks. Incomplete or late requests may not be considered*) _____

Contact name: _____

Phone: _____ Email: _____

Address: _____

Contact persons relationship to the organization/event:

Employee Volunteer Paid Worker Fund Raiser

Financial amount you are requesting: _____

To whom should the check be made payable? _____

Has Fairview Range sponsored this event in the past: YES NO

Provide a brief description of the organization:

Provide how the sponsorship dollars or donation will be used:

What kind of advertising/signage and recognition will Fairview receive, if any? You may include a separate attachment outline benefits and recognition if needed.

Describe how this event and our donation will benefit our community.

FOR FAIRVIEW RANGE USE ONLY:

Date received: _____

Total sponsorship value: _____

Sponsorship: Approved Denied

Sponsorship amount approved: _____ Charitable donation item: _____

Entity to sponsor: _____