

Donation & Sponsorship Request Form

Thank you for your request! We are excited to assist in the community's next adventures. Please note that we do prioritize members in our yearly giving. Fill out the <u>entire</u> form below & send to marketing@ontapcu.org. The forms will be evaluated in the order that they are received. You will be contacted if more details are needed. Cheers!

Date:	Are you a member?
FullName:	
SEG/Brewery Business Part	er \square Arvada, Golden , or other surrounding community \square
Name of Organization for dor	ntion and/or sponsorship:
Contact Person:	
Mailing Address:	
City:	State:Zip:
TaxStatus: Non-profit	Business Gov., Tax ID#
Type Of Event:	Date Of Event:
Please note, request must be Board of Directors/CEO.	received 30 or more days prior to event. Large donations must be approved by On Tap's
Specific Type of Request:	
Gift Certificate (Amount \$)	Cash/Check (Amount \$)
Merchandise (Type)	
Describe other specific deta	Is about the event:

On Tap Credit Union Mission

We are passionate about crafting banking solutions for members. We connect with our members, local businesses and neighbors to provide the best financial guidance in our communities, and we work to make a positive impact in helping dreams come true.