GT&T SPONSORSHIP REQUEST FORM

Please complete this form a **minimum of six (6) weeks** prior to your event and indicate any print or advertising deadline. Please allow a response time of **15 working days** following receipt of your completed forms.

L.							
	Organisation De	tails				*Required F	ields
	*Organisation			*Years Exist	ting		
	*Address			*Phone no.			
2.	Contact Details	_	*Required Fields				
	*Name			*Email Address			
	*Phone no.		Mobile		Fax		
	3. Event Detai	ls				*Required F	ields
	*Name				*Venue		
	c						
	*Date		Venue		Ticket Cost		
			Capacity		Cost		
4	0						
C	Concert Event		Pag	eant	0	Concept Party	
C	Children Oriented		Arts /	Drama	Other		
	5. Previous Ever	nt Details				*Required Fie	lde
	*Last Event Hosted	Te Decums			*Venue	- Required Fie	
					31100		
	*Attendance						

6. D€	escribe your	orga	nization's	ove	rall mission/purpose:							
7. Ple	ease provide	a de	etailed de	scrip	tion of the event:							
8. W	/ho is the tar	get	audience	for y	our event? (Specify age group and	geno	der)					
9. Ple	ease provide	a lis	t of other	- corp	porate sponsors and their level of s	uppo	rt:					
10.	10. How will GT&T be recognized for its support?											
12 . ⊦		eviou	ısly partn	ered	el of sponsorship requested from G I with GT&T on any event/project							
	•											
13. F	Proposed be	enef	its for G	Г&Т	- Please tick the relevant boxes & g	give c	letails					
0	Television	0	Radio		Newspaper		Flyer/Brochure					
	Magazine		Signage	Г	Delegate Travel		Programme Collateral					
0	Website	Г	Other									
*Details of Benefit												
				Re	quired							
	re you been i				4	lo						

Kindly submit your proposal and a completed form to GT&T, 79 Brickdam, Georgetown.