

ORANGE CUP

2701 East Main Street, Galesburg, IL 61401
(309) 297-4475

www.orangecup.com

Donation Requests & Sponsorship Form

Contact Person Name:

Organization/Group Name:

Email Address:

Date of Event:

Phone Number:

Organization Website (*if any*):

Mailing Address:

City, State, Zip:

About Type of Request: (*mark one*)

- ☐ Specific items or support requested: (*e.g., coffee, baked goods, gift cards, other*)
- ☐ Sponsorship
- ☐ Quantity/value desired _____

Are you a customer of Orange Cup? [] Yes [] No

Please explain:

Description of Event, Program, or Purpose:

(*Briefly describe your event, project, or need. Who does it benefit? What is your goal?*)

How will Orange Cup be recognized as a supporter?

(*e.g., Social media shout-out, event signage, etc.*)

Community Impact

How many people will benefit?

Location of event/project:

Are there other partners or sponsors?

Additional Information

Have you received support from Orange Cup before? [☐] Yes [☐] No

If yes, please specify date and nature of support:

Any other relevant information?

Agreement

I certify that the information I have provided is accurate and complete. I understand that completion of this application does not guarantee a donation or sponsorship.

Applicant Signature: _____

Date: _____

We love to assist local, mutually beneficial groups with fundraising, however please understand that our donation dollars are limited.

Please print out this form, fill it in and bring into our store during open hours, or email the completed application to melany@orangeocup.com

We will not be able to respond to calls or emails about a donation until this form has been reviewed by our team. We review requests monthly and will respond as soon as possible.

Thank you for thinking of the Orange Cup!