



Charitable Giving Request: Guidelines & Application

970-726-9476 | bottlepassliquors.com

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1. Select *File > Save Page As* (*File > Save As* or select the *Download Icon*)
2. Choose the file location on your computer (Remember the file location as you will need to browse to find this file)
3. Select *Save*
4. Close your browser window as it is no longer needed

Fill out the form

1. Navigate to the file on your computer
2. Open with Word
- 3.
4. Please read through our guidelines on the next page and fill out the form on the next few pages
5. Once you have filled out the form select *File > Save As*
6. Change the file name to your name or your organizations name and save the file

Send this completed form and supporting documents to us

1. Email the application and supporting documents to bottlepass621@yahoo.com or, you may drop off the documents at the store. To allow for adequate time for review and response, submit your request a minimum of 30 days prior to the date of your event.

Required information to be included with this application:

- Proof of 501 (c) (3) or similar non-profit organization
- Current list of board of directors
- Mission statement
- Background material on the organization (e.g. fact sheet, brochure, annual report, etc.) *This information will not be returned to you.* If you have questions, please call us at 970-726-9476 or email bottlepass621@yahoo.com

Bottle Pass Liquors Charitable Giving Request Application

Contribution and sponsorship requests must be made in writing and will be considered when this completed form and all required support materials are mailed or emailed to:

Bottle Pass Liquors. Attn: Charitable giving
P.O. Box 621
Fraser, Co. 80442 or: bottlepass621@yahoo.com

Name of Organization: _____

Name of Contact: _____

Title (optional): _____

Physical Address: _____

Apt. or Suite #: _____

City: _____

State: _____

Zip Code: _____

Direct Phone #: _____

Fax # (optional): _____

Email: _____

Web Site (optional): _____

Date of Event: (mm-dd-yyyy) _____

Deadline to participate: (mm-dd-yyyy) _____

Deadline to receive donation items: _____

All fields are required unless indicated as optional

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Check the type of support you are requesting:

In-kind auction donation of product:

Live

Silent

Event sponsorship

\$ _____ Amount Requested

Cash contribution

\$ _____ Amount Requested

Brief description of specific project or program:

Is your organization partnering with any non-profit groups?

If so, how?

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Who will benefit from this project or program?

Have you lined up additional sponsors? If so, which ones?

Has Bottle Pass Liquors supported your organization in the past?

yes no

If so, please describe the past support.

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Recognition for Event Sponsorships and Contributions

Please outline your proposed acknowledgement of Bottle Pass Liquor's participation. (You may attach a list of sponsor benefits, which might include recognition in print materials, signage, etc.)

Please indicate any materials you need from Bottle Pass Liquors for sponsor recognition (optional):

Program ad

Due date _____

Specifications (exact size, file format, color or b&w, etc.)

Logo

Due date _____

Specifications (exact size, file format, color or b&w, etc.)

All fields are required unless indicated as optional