



2019 DONATION & SPONSORSHIP REQUEST FORM

Thank you for your request! We are excited to assist in the community's next adventures. Please fill out the entire form below & send to marketing@ontapcu.org. The forms will be evaluated in the order that they are received. You will be contacted by On Tap's Marketing team if more details are needed. Cheers!

Date: _____

Full Name: _____

SEG/Brewery Business Partner Arvada, Golden or other surrounding community

Name of Organization for donation and/or sponsorship:

Contact Person: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tax Status: Non-profit Business Gov., Tax ID# _____

Type Of Event: _____ Date Of Event: _____

Please note, request must be received 30 or more days prior to event. Large donations must be approved by On Tap's Board of Directors/CEO.

Specific Type of Request: _____

Gift Certificate (Amount \$) _____ Cash/Check (Amount \$) _____

Merchandise (Type) _____

Describe other specific details 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.

MEMBER OWNED AND COLORADO PROUD!