

# APPLICATION FOR SPONSORSHIP OR DONATION



FOR INTERNAL USE

Date of receipt:

## GENERAL INFORMATION

Name of the organization:

Address:  Telephone:

Town/City:  Fax:

Web site:

Person in charge:

Telephone:  Email:

Is this a non-profit organization?  YES  NO

Does the organization have an account with Desjardins?  YES  NO

If yes, please indicate which Caisse and folio number (mandatory):

If not, please indicate the name of your financial institution

Did the organization receive a donation or sponsorship from Caisse populaire Trillium last year?  YES  NO

If yes:

Indicate the name of the project:

Indicate the amount received:

Are you a Desjardins member (personal account)?  YES  NO

If not, please indicate the name of your financial institution:

## PROJECT DESCRIPTION

Please describe the project.

What are the goals of the project?

What community need is the project fulfilling?

Which segment of the community is the project targeting (children, teenagers, adults, seniors, etc.)?



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What purpose will the financial support from the Caisse serve?

Number of individuals who will or should benefit from the project:

Date and location:

What type of activity is it?  LOCAL  REGIONAL  PROVINCIAL

List the community(ies) / region(s) that will be affected by this project:

## PROJECT COST AND VISIBILITY

Total estimated cost of the project:

*Please provide a detailed budget of the activity (mandatory).*

Amount requested from the Caisse:

Date to receive the amount:

Other source of revenue for this project (specify the amounts):

What type of visibility plan are you offering the Caisse in exchange for financial support?

Do you offer exclusivity to a financial institution?  YES  NO

**I hereby declare that the information provided in this form is accurate and that I am authorized by the organization to fill this application on its behalf.**

Signature

Date

**The application must be sent at least 90 days before the event or the implementation of the project.**

**Please return this application along with the required supporting documents to the email or address below.**

**Applications will be processed monthly. Please allow a minimum of 30 to 60 days for processing.**

Caisse populaire Trillium  
c/o Marie-Élise Trottier, Communication Advisor  
2591 St-Joseph Boulevard, Orléans ON K1C 1G4

**Email:** marie-elise.a.trottier@desjardins.com

This application form is also available on the Caisse Web site:

**desjardins.com/en/caissetrillium**

(Click on "Involvement in the community", then on "Donations and sponsorships".)

**The members of the management will review your application according to the administrative policy in effect. Their decision is final and cannot be appealed.**



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