Sponsorship Application

(Must be received by Port Houston at least six (6) weeks' prior to event, program or project)

| 1. | Date: | | |
|----|--|--|--|
| | Organization Requesting Support: | | |
| | Organization Address: | | |
| | Contact Person: | Title: | |
| | Phone: Fax: | Email: | |
| | Organization Mission: | | |
| 2. | Name of event, program or project: | | |
| | Date(s) of event, program or project: | | |
| 3. | | ections 501(c) (3) or 170(c) of the United States Internal Revenue Code, or Tax ID#: Public Agency New | |
| 4. | Dollar amount or in-kind services requested: | | |
| 5. | cupporting material) | n's resources will be used. (Please complete below. You may also attach | |
| 6. | Which of the following targeted areas does this progr Maritime Commerce Economic 8 Community Outreach Environmer | /or Workforce Development | |
| 7. | Has Port Houston supported your organization in the | | |
| _ | If yes, when and for what event, program or project? | | |
| 8. | How will Port Houston be recognized as a sponsor/page 1 | rticipant? | |
| | | | |
| | BODT | SM SM | |
| | PORI | HOO210N | |
| | Representative's Signature | Representative's Printed Name | |
| | Title | Date of Signature | |

Please attach the following (the application will be considered incomplete without this information):

- Cover letter describing the purpose for which the sponsorship is being sought, stating the level of sponsorship being requested
- Mission of the organization
- · Brief description of services, programs, and activities and proposed marketing benefit
- Program budget