



## Donation & Sponsorship Application

Organization should review the Ho-Chunk Gaming Donation and Sponsorship Guidelines before applying.

Date of Request \_\_\_\_\_ (incomplete applications will not be considered)

Type of Request: (Requests must be made **60 days** in advance of an event to be considered)

Monetary (amount) \_\_\_\_\_  Sponsorship (amount) \_\_\_\_\_  
 Gift Basket

Organizations receiving donations/sponsorships from Ho-Chunk Gaming facilities acknowledge that the funds are generated from gaming dollars. Organizations hereby authorize Ho-Chunk Gaming to use their name in advertising, and publicity surrounding Ho-Chunk Gaming and the Ho-Chunk Nation. **Initial:** \_\_\_\_\_

Request needed by \_\_\_\_\_

Organization Name \_\_\_\_\_ Date of Event: \_\_\_\_\_

Contact Person and Title \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact e-mail: \_\_\_\_\_

Web address: \_\_\_\_\_

Which of the following categorizes best describe your organization?

Non-Profit  Not for Profit  For Profit  Individual  
 HCN OOP  HCN Dept. of Bus.  HCN Department: \_\_\_\_\_  
(Name of Department)

Charitable organization Federal Tax I. D. number: \_\_\_\_\_

What is the target audience for the event? E.g. adults, kids, golfers, walkers, skiers....  
\_\_\_\_\_

Event Name: \_\_\_\_\_

Is this a first-time event:  No  Yes If No, what was your last year's attendance? \_\_\_\_\_

**Ho-Chunk Gaming Donation & Sponsorship Application – continued**

Organization Name: \_\_\_\_\_

A brief history of the organization and its goals (brochure or other official document preferred)

\_\_\_\_\_  
\_\_\_\_\_

Detailed description of how the donation will be used

\_\_\_\_\_

How will this event/program impact the community and your organization, including how many people the donation will affect?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What type of advertisement will Ho-Chunk Gaming receive from this event/program?

\_\_\_\_\_

What media will be used for the event? (List names of companies advertising with)

- TV stations \_\_\_\_\_
- Newspaper \_\_\_\_\_
- Radio \_\_\_\_\_
- Magazine \_\_\_\_\_
- Website \_\_\_\_\_
- E-mail       Billboard       Other: \_\_\_\_\_

Has your organization requested and/or received donations from any of the following?

Ho-Chunk Gaming properties: Ho-Chunk Gaming Black River Falls, Ho-Chunk Gaming Wittenberg, Ho-Chunk Gaming Madison, Ho-Chunk Gaming Wisconsin Dells, or the Ho-Chunk Nation Community Relations Committee in Black River Falls within the past 12 months

No  Yes If yes, which organization: \_\_\_\_\_ Date donation was received: \_\_\_\_\_  
What was donated: \_\_\_\_\_

Names of other sponsors/donors & amounts donated

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return completed application with literature or publicity materials for the event to:

**Ho-Chunk Gaming Nekoosa**  
Missy Redcloud -SMPR  
949 County Rd G Nekoosa, WI 54457  
E-mail: melanie.mcdonald@ho-chunk.com  
Phone: (800) 782-4560 Ext. 28255; Fax: (715)886-4463

Office use only
Received: _____ Initials: _____
Action _____