



### Donation & Sponsorship Application

\*Organization should review the Ho-Chunk Gaming Donation and Sponsorship Guidelines before submitting an application.

\*Requests must be made **90 days in advance** of an event to be considered

\*Raffle items must be received **60 days in advance** of an event to be considered.

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

Type of Request:

☐ Monetary (amount) \_\_\_\_\_ ☐ Sponsorship (amount) \_\_\_\_\_

☐ Promotional items i.e. shirts, pens.... ☐ Redemption Slips or Vouchers for dining

☐ Gift Certificates or Free/Rewards Play

☐ Playing cards Qty: \_\_\_\_\_ (For quantities greater than 100, use this form)

☐ Dice Qty: \_\_\_\_\_ (For quantities greater than 100, use this form)

\*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, 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:

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

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

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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 within the **past 12 months**:

- ☐ Ho-Chunk Gaming properties: Ho-Chunk Gaming Nekoosa
- ☐ Ho-Chunk Gaming Black River Falls
- ☐ Ho-Chunk Gaming Wittenberg
- ☐ Ho-Chunk Gaming Madison
- ☐ Ho-Chunk Gaming Wisconsin Dells
- ☐ Ho-Chunk Nation Community Relations Committee in Black River Falls

☐ No ☐ Yes                      If yes, which organization: \_\_\_\_\_

Date donation was received: \_\_\_\_\_ What was donated: \_\_\_\_\_

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

Names of **other** sponsors/donors & amounts donated:

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

**Ho-Chunk Gaming Wisconsin Dells**

Public Relations Marketing Department  
S3214 County Hwy BD, Baraboo, WI 53913  
(608) 355-7770 Ext. 22176  
Fax: (608) 355-4046  
Email: [Yengkong.thao@ho-chunk.com](mailto:Yengkong.thao@ho-chunk.com)

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