

- We'll let you know the outcome of your application within 60 days.
- Your organisation must be an incorporated body, have a DGR status or be a community not for profit organisation.
- We'll request you help promote Community Bank Mount Martha as part of your sponsorship, and request you move your organisation's banking to us if possible.

Please attach any additional information you believe might help with your application.

Post or deliver your application to:

- · Shop 6 34-38 Lochiel Ave Mount Martha
- · PO box 288 Mount Martha VIC 3934
- · mountmarthamailbox@bendigoadelaide.com.au

About you

Title:	First Name:	Surname:
Your role/ti	tle within your organisation:	
Phone (Offi	ice Hours):	Phone (Home):
Phone (Mo	bile):	Email:
About yo	our organisation	
Name:		
Address:		
Website:		
ABN (if app	olicable):	



Is your organisation registered for GST? 🗆 Yes 🗀 No
Tell us about your organisation - how long have you been active, how many members do you have, what's your mission and your values?
Does your organisation currently bank with us? 🗆 Yes 🗆 No
If No, will you consider opening a Bendigo Bank account with us? \square Yes \square No
What you'd like us to sponsor
Name of event/proposal/program:
Date of event/proposal/program:
Location of event (if applicable):
Description of event/proposal/program including its purpose and history (years running, past performance, past sponsors etc):
How many people do you expect to attract? What age group?
The manage properties are supported are accounted to a group.
Sponsorship Objectives
Please outline the main objectives of the proposed event/proposal/program:

How will you measure these objectives?				
Sponsorship Information				
What sponsorship amount are you requesting (inc. GST)?				
When do you need it?				
What will you use it for?				
If you'd like to request in-kind support (our staff time) please let us know how:				
Will we be the only financial institution to sponsor your event/organisation? \square Yes \square No				
Is anyone else sponsoring your event/organisation and if so, what is the extent of their support?				
Is this a once off, or an ongoing opportunity/event?				
<u></u>				
Have we sponsored your organisation in the past? \Box Yes \Box No				
If yes, please provide details:				
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Sponsorship Benefits						
Please select the benefits of the spons	orship to Bendigo Bank:					
Presentation rights	☐ Networking opportunities	☐Hospitality				
Tickets / Passes	☐ Ticket discounts	□Logo placement				
Advertising space	Product display	Access to Ambassadors				
Website presence	Social Media	Merchandise				
Footage use	Photography use					
Other:						
Date:						
Signed:						
Full Name (please print):						
If your application is successful you will	he required to complete an efficial Sp	vancarchin Agraament The ghave				
information will assist with the complet		onsorship Agreement. The above				
Reminder: Please attach any additional information you believe will add to the assessment of your sponsorship						
application.						
Notes (BRANCH USE ONLY)						

Privacy: Mount Martha Community Enterprise LTD ABN 25 142 190 949 who own and operate Community Bank Mount Martha will collect, hold and use your personal information to assess your application and respond to your request. Your information may be shared with Bendigo Bank and organisations that carry out functions on behalf of Bendigo Bank. For information on how we handle your personal information or how you can access it please read our Privacy Policy www.bendigobank.com.au. Bendigo and Adelaide Bank Limited ABN 11 068 049 178, AFSL/Australian Credit Licence 237879 A1373510, OUT_2064045, 11/05/2021

