



Sponsorship Request Form

The Health & Hospital Corporation of Marion County, Indiana, (HHC), for sponsorship purposes, encompasses Eskenazi Health, the Indianapolis Emergency Management Services, and the Marion County Public Health Department. Organizations requesting HHC or one of its divisions to sponsor an event or program must complete the form listed below.

Notes

- Requests must be submitted 45 days in advance of the date of the event or commencement of the program.
- HHC receives many sponsorship requests and are unable to support all requests.

Organization

Name of organization

Address of organization

Website address

Federal Tax ID number

Federal Tax ID status (i.e., 501c; etc.)

Mission of organization and description of services provided in Marion County

Contact person at organization, including name, title, email, and phone



Requested Sponsorship

Name of event or program

Date of event or program

Location of event or program

List of sponsorship levels and corresponding benefits and details

Payment instructions if the event or program is approved for sponsorship

Attach to this request associated flyer(s) for the event or program

Sponsorship Details

Brief overview of event or program

The mission of HHC "is to promote and protect the health of everyone in the community and provide healthcare to those who are underserved." The vision of HHC "is that Indianapolis will be the healthiest large city in the United States by the year 2030." How does your event or program align with HHC's mission and vision?

Information on the services that your organization provides in Marion County and if not countywide, please be specific about the geographic areas benefited by your work.

Conflicts of Interest, Etc.

Provide a list of your governing board membership and the name of any board member or executive leader of HHC or one of its divisions who is an active volunteer for your organization.

Has your organization been sponsored by HHC or one of its divisions within the past three years? If so, please specify the event(s) or program(s) and the year(s) supported.

Does your organization currently receive any grant funds from or through HHC or one of its divisions? If so, please explain.

