

SPONSORSHIP AND DONATION APPLICATION FORM

All application for sponsorship/donations must be submitted at least <u>60 days prior</u> to the scheduled project or event.

Please complete the application form within 2 days to the best of your ability and email it to swkmun@swkmun.com.na or fax to email: 088 614 514, Enquiries (064) 4104100. All requests submitted will be reviewed and followed up with a response.

Name of event:
Place of event:
Date of the event (start):Time:End of event:Time:
Name of organization:
Full address of organization:
Telephone: Website:
Name of contact person:
Position:
Contact number (s):
Email:
Total amount or resources requested

□ Health
□ Education
□ Community
□ Environment
☐ Arts and Culture
☐ Sports and Recreation

Kindly note that an application letter for donation or sponsorship must be submitted in writing and must include the following:

- An outline of the project or event for which the donation or sponsorship is being requested and the expected outcome.
- The amount being requested, together with a total budget or projected cost of the event.
- Indication whether entry fee(s), ticket(s), etc. will be issued and, if so, the cost(s) thereof.
- A list of all project contributors or partners, particularly companies.
- A list of personnel involved with running the organisation.

Event sector (please tick)

• Information and commitments that the applicant will render to Council in lieu of the donation or sponsorship.

Preference is given to individuals/ groups/ organisations that:

- Are non-profit and can demonstrate community support and involvement.
- Are working for the benefit of a wide range of stakeholders, in particular the youth, women, elderly and the disabled within a community.
- Can demonstrate how the money or in-kind donation is to be spent and the expected outcome of the event.
- Commit to acknowledging the Swakopmund Municipality's contribution through the placement of various promotional banners, brochures, posters and the Swakopmund Municipality's logo on promotional material.
- Commit to providing the Swakopmund Municipality with a letter that summaries the outcomes and benefits following the hosting of the event, where applicable.

The following terms and conditions apply in cases when events are taking place at Council's property (hall, stadium, parks, etc.):

- 1. That noise levels in respect of the applicant must not be more than 85 dB (Decibel) at the noise source (thus the speakers) and not more than 60 dB at a distance of 200m and should valid complaints be received, permission can be withdrawn immediately.
- 2. That the applicant ensures that the facilities including the parking area are cleaned within 48 hours after the event.
- 3. That Council be indemnified against any claims that may arise from using the venue.

- 4. That the stadia concerned be restored to their original conditions and to the satisfaction of the Swakopmund Municipality after the function.
- 5. That the applicant be responsible for the provision and arrangement of public ablution facilities on site, if required.
- 6. That no person should overnight on the premises, except for security purposes.
- 7. That Council reserves the right to cancel the use of the stadia should Council needs them for its own purposes.
- 8. That the applicant make prior arrangements with Erongo-RED for electricity connection at their own cost should it be required.
- 9. That the event be wrapped up by 2AM.
- 10. That the applicant submits proof that the following arrangements have been made:
 - Emergency Services
 - Traffic Control and Parking
 - Waste removal
 - Security Services
- 11. The organization agrees to submit to the Municipality of Swakopmund an event/project post-mortem, photos and press review, within **30 days** following the date of the event/project.

I declare that all the information I have provided on this form is accurate, and that I am authorized by the abovementioned organization to submit this application.

Name							
Signature							
Date							
FOR OFFICIAL USE							
DATE DECENTED.	EVENT CECTOD.						
DATE RECEIVED:	EVENT SECTOR:						
REVIEWED BY:	☐ APPROVED ☐ DENIED						
IF APPLICATION WAS DENIED, LIST REASON(S) FOR DENIAL:							
SIGNATURE OF CHAIRPERSON	DATE APPROVED:						