



## Event Co-Sponsorship Proposal Form

Today's Date: \_\_\_\_\_ Proposed Event Date: \_\_\_\_\_  
 Event Name: \_\_\_\_\_ Load In Time: \_\_\_\_\_  
 Co-Sponsoring Department: \_\_\_\_\_ Event/Show Start Time: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Event/Show End Time: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Load Out Completed: \_\_\_\_\_  
 Group to be co-sponsored: \_\_\_\_\_ Event Location: \_\_\_\_\_  
 Address: \_\_\_\_\_ Billing Name: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Billing Address: \_\_\_\_\_  
 Is this a For-Profit Agency/Organization? Yes/No Will tickets Be Sold? Yes/No  
 Money from ticket sales goes to? \_\_\_\_\_

### IPFW School or Department Sponsorship Criteria and Guidelines:

1. There must be a logical connection between the IPFW sponsor and the outside organization.
2. The IPFW sponsor must have significant participation in the activity or event. This includes, being onsite the entire time the co-sponsored group is on campus for their event and being the sole point of contact on event day between the University and the co-sponsored group.
3. All event publicity must list IPFW and the sponsoring department in comparable size and status as the outside organization.
4. A tangible benefit must accrue to the University.
5. Co-sponsorship terms between the involved parties must be documented in a letter of agreement or contract.
6. The sponsoring department becomes the sole university contact for the group. All requests of the University (e.g. scheduling, facility set-up, LRC, Police and Safety, catering, etc.) must be made by the IPFW sponsor.
7. For all co-sponsored events, all money to be collected (thru ticket sales, etc) is to be collected by approved cash handling venues in the University (RMC Box office, Gates Sports Center, Continuing Studies) at pre-established costs. The University will then disperse the collected funds to the co-sponsored group.
8. Co-sponsorship forms must be submitted and approved no less than 10 business days prior to the scheduled event date.
9. Any exceptions to the above items must be approved in writing by the comptroller's office.

Briefly describe how your proposed event fulfills the co-sponsor criteria.


I understand co-sponsored events as described above. I agree to be the sole contact person between the facility manager and the co-sponsored group. I agree to be on site for the entire event including load in and tear down. My department guarantees timely payment of all charges and fees by the co-sponsored group. In the event the co-sponsored group will not or is unable to pay associated charges and fees my department agrees to be fiscally responsible.

Signature of Campus Person Proposing Sponsorship: \_\_\_\_\_

Title: \_\_\_\_\_

Department Head Approval: \_\_\_\_\_

Business Manager Approval: \_\_\_\_\_

NOTE: This form must have all approval signatures before the event contract can be written.

Copies: Original to the Co-sponsoring department \_\_\_\_\_ Copy to: Comptroller \_\_\_\_\_ Business Manager \_\_\_\_\_ Facility Event Staff \_\_\_\_\_