

. GENERAL INFORMATION:

Program: _____ Location(s): _____

Date(s): _____ Times: _____

Coordination Meeting Date: _____ Location: _____

. CONTACTS:

(Sponsoring Organization) (Co-sponsoring organization #1) (Co-sponsoring organization #2)

(Sponsor representative) (Co-sponsor #1 representative) (Co-sponsor #2 representative)

(Title) (Title) (Title)

(Email address) (Email address) (Email address)

(Telephone Number) (Telephone Number) (Telephone Number)

. CO-SPONSORSHIP TERMS:

The Sponsoring Organization will provide: Estimated cost:
_____ by date: _____
_____ by date: _____
_____ by date: _____

Co-sponsoring organization #1 will provide: Estimated cost:
_____ by date: _____
_____ by date: _____

Co-sponsoring organization #2 will provide: Estimated cost:
_____ by date: _____
_____ by date: _____

. CO-SPONSORSHIP AGREEMENT:

The _____ and _____ agree to present the above program. Both groups will provide the items listed by the specified dates. Any additional contributions must be jointly agreed upon and logged before implementation. If co-sponsoring group does not fulfill their agreed obligations by the appropriate dates, or provides additional services not agreed upon, the Sponsoring Organization/ Committee retains its right to cancel involvement and sponsorship of this program.

Agreed and accepted:

(Sponsor representative) (Co-sponsor #1 representative) (Co-sponsor #2 representative)

(date) (date) (date)