



# Leq'á:mel Development Corporation

## SPONSORSHIP REQUEST

<b>Name of Applicant or Organization:</b>
<b>Event Details:</b>
<b>Request</b>
Financial Support \$
LDC Branded Product - Item and sizes
Other
<b>Use of Funds or products:</b>
<b>Have you requested funds and supports from other organizations? Please list</b>
<b>Sponsorship is required by: DD/MM/YY</b>
<b>Contact Persons:</b>
<b>Tel Number:</b>
<b>Email:</b>
Emailed this completed form to: <a href="mailto:Infoldlp@leqamel.ca">Infoldlp@leqamel.ca</a> (please allow 7 business days)

<b>This section for LDC Only</b>	
Amount approved: __\$_____	Date: _____
Authorized by	
_____	_____
Print Name	Signature

200 - 41350 Lougheed Highway, Deroche, BC, V0M 1G0

<https://leqameldevelopmentcorporation.ca>