



UPPER HUNTER SHIRE YOUNG ENDEAVOUR SCHEME SPONSORSHIP FORM 2017/18

Name of Sponsors/Group: _____

Postal Address: _____

Contact Person: _____

Contact Number: _____ Email: _____

I/we have read the Sponsorship information and understand the benefits pertaining to the nominated sponsorship level.

I/We will be committing sponsorship to the value of \$ _____ to this development activity for the young people of Upper Hunter Shire entitling us to become: *(please tick sponsorship level)*

Gold Sponsors
(over \$1,000.00)

Silver Sponsors
(from \$250.00 to \$999.00)

Bronze Sponsors
(up to \$249.00)

Nomination:

Yes, as a Gold/Silver Sponsor I/we would like to nominate.

We do not wish to nominate.

Method of Payment:

Cheque: Please find enclosed cheque made payable to Upper Hunter Shire Council to the value of \$ _____.

I/we wish to make a commitment in the amount of \$ _____ and will make payment upon receipt of a Tax Invoice.

Signed: _____ Date: _____

Print Name: _____

Please return the completed sponsorship form to any of Council's offices, or mail to:

Upper Hunter Shire Council
PO Box 208, Scone NSW 2337

PRIVACY STATEMENT The personal information that Council is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The intended recipients of the personal information are officers within Council; data service providers engaged by the Council from time to time; and any other agent of the Council.

The supply of the information is voluntary. If you cannot provide or do not wish to provide the information sought, Council may be unable to process your application. You may make application for access or amendment to information held by Council. You may also make a request that Council suppresses your personal information from a public register. Council will consider any such application in accordance with the Act. Council is the agency that holds the information.

Enquiries concerning this matter can be addressed to the Public/Privacy Officer.

OFFICE USE ONLY: RECEIPT CODE: 420 JN: 01780.0140.0238

RECEIPT #: _____ AMOUNT: _____ RECEIPT ISSUED: DATE: _____

TAX INVOICE REQUIRED: Y / N TAX INVOICE ISSUED: LETTER ISSUED: