



## Community Event Sponsorship Request Form

The mission of Excelsa Health is to improve the health and well-being of every life we touch. We recognize that health care means more than just the physical treatment of patients within the walls of our hospital. It means supporting the community with information, services and monetary donations. For sponsorship consideration, requests must fit within the mission, vision, values and strategic plan of Excelsa Health.

All requests, with appropriate supporting information, for financial and in-kind contributions from the organization should be submitted to Excelsa Health's Community Relations Department **at least three months** before the contribution is required.

Requesting organizations are required to fill out this form in its entirety. Print this form, fill in completely, and send along with detailed sponsorship information regarding your organization and event. Mail to:

**Marketing/Communications**  
**Attn: Patricia Buhl**  
**226 Donohoe Road, Suite 111**  
**Greensburg, PA 15601**  
[pbuhl@excelsahealth.org](mailto:pbuhl@excelsahealth.org)

Questions? **Call:** (724) 689-0202  
or **Fax to:** 724-837-1652

Alternatively you can save this document to your computer, type in your information and save as an electronic file to be attached to an e-mail. You must also attach electronic files with detailed sponsorship information regarding your organization and event. Please e-mail to [pbuhl@excelsahealth.org](mailto:pbuhl@excelsahealth.org).

Date of request:

Name of organization or group making request:

Name of Contact Person:

Address:

City:

State:

Zip:

Phone:

Email:

Website:

**Details of Request**

Name of event:

Date:

Time:

Location:

What is the purpose/goal of this event?

Brief description of event:

Did Excela Health sponsor this event last year?

Yes  No

Target audience

Expected attendance

**Sponsorships:**

What is your request of Excela Health?

Need by:

How would this sponsorship be mutually beneficial?

How does this sponsorship promote Excela Health's mission?

If this sponsorship is approved, I agree to cross promotion of this event with Excela Health's digital and print marketing platforms, including: Facebook, Twitter, Instagram, YouTube, Print, Broadcast

Yes  No

Comments:

**For consideration, event sponsorship material must be included:**

*If submitting the application without supporting materials, please note in comment section that materials will be mailed separately. Mailed materials must have organizations name and request date on each page.*

**Submit to:** [pbuhl@excelahealth.org](mailto:pbuhl@excelahealth.org)