



This form is used for internal review by Bishop's Cellar for organizations requesting donations or product discounts for charitable purposes.

INSTRUCTIONS: To apply, complete all fields and submit for review. **Forms can be submitted by fax at 405-3930 or e-mail to [hannah@bishops cellar.com](mailto:hannah@bishops cellar.com).** If you have any questions about completing this application, please use the above email or call Hannah at 902-877-5038.

**Part 1: Organization Information**

Applicant's Name: \_\_\_\_\_

Charitable Organization: \_\_\_\_\_

Charitable Organization #: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Part 2: Event Information**

Name or Type of Function: \_\_\_\_\_

Explain Function: \_\_\_\_\_

\_\_\_\_\_

Location of Function (address/room/size): \_\_\_\_\_

Date(s) of Function: \_\_\_\_\_

Time(s) of Function: \_\_\_\_\_

Officials attending: \_\_\_\_\_

Annual Event (Y/N, if yes please include number of years): \_\_\_\_\_

\*Please include event overview, poster, etc to assist us in the decision process

**Part 3: Donation Request**

Type of Donation Requested: \_\_\_\_\_

Value of Donation: \_\_\_\_\_

Audience/ Demographic: \_\_\_\_\_

Relationship to Bishop's Cellar (i.e. Employee, family member, agent, etc): \_\_\_\_\_

Purpose of Fundraising? \_\_\_\_\_

How will funds be used? \_\_\_\_\_

\*Please allow 5-8 business days for internal review and a response to your query

**Part 4: Internal Review *(Bishop's Cellar Use Only)***

Approval: \_\_\_\_\_

Contribution: \_\_\_\_\_

Notified: \_\_\_\_\_

Follow Up: \_\_\_\_\_