



TALKA CREDIT UNION DONATION APPLICATION

General Instructions

1. All requests must be submitted on an official application form found on Talka’s website. If you are unable to fill out and submit the application electronically, please print out a blank form and complete each field by hand.
2. Applications that exclude a dollar amount will not be considered by Talka’s Community Partnerships Working Group (CPWG).
3. Please ensure that you provide sufficient time to allow the CPWG to review your application and make a recommendation to the Talka Board of Directors.
4. If the donation is for an event, the CPWG would require at least three months notice which would also include enough time for Talka to provide any artwork, signage and social media advertising and make arrangements for a representative of Talka to make a brief presentation.
5. If your application is rejected, Talka Credit Union will not provide notice of rejection unless requested to do so by the applicant.
6. Talka Credit Union Limited is not obligated to provide any reason for its decision to reject an application.

Applicant Information:

Name of organization making the request (“The Applicant”):		Amount Requested:
Name of Contact Person:	Telephone and Email Address:	Mailing Address of organization
Has the Applicant previously received funding from Talka? Yes <input type="checkbox"/> No <input type="checkbox"/>		Is the Applicant a non-for-profit association or registered charitable organization ?

Event/Activity Information:

Name of Event/Activity/Other:	Date of Event/Activity/Other:	Location:
Description of Event/Activity/Other:		
Explain who this event/activity/other benefits and how?		

Affirmation

I affirm that the information in this application is complete and accurate. I understand that Talka reserves the right to publicize the recipients and events that it helps fund and that the recipients will acknowledge any funding received from Talka Credit Union and use approved branding in their communications materials.

Signature of Contact Person:	Name and Title:	Date:
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Please send your completed application to;

Talka Credit Union Limited
Attn: Community Partnership Working Group
830 Main Street East, Hamilton, Ontario, L8M 1L6

Or via email to rsmith@talka.ca