



# BF&M Sponsorship and donation request form

Please note all fields are required to be completed for us to review your request.  
Applications should be submitted via email to [csr@bfm.bm](mailto:csr@bfm.bm).

## 1. Requestor details

### Company details

<input type="checkbox"/> Charity—If yes, registration # _____		<input type="checkbox"/> Business	<input type="checkbox"/> Individual	<input type="checkbox"/> Other _____
Organisation name:		Year founded:		
Organisation address:				

### Requestor details

Name (first/middle/last):		Title:
Phone: W	C	Email:

## 2. Your initiative and service

Which of BF&M's Pillars of Giving does your organisation align with? For more information, visit <a href="http://bfm.bm/community">bfm.bm/community</a> . <input type="checkbox"/> Youth and Education <input type="checkbox"/> Our Heritage, Our Future <input type="checkbox"/> Wellness <input type="checkbox"/> None of the above
What services does your organization provide? Please describe briefly.
Does your organization have a signature event/events that it runs? Please describe.
How does your initiative benefit the broader community?
How can your initiative benefit the BF&M Group?
Does your organization have financial reports available? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization have a website? <input type="checkbox"/> Yes <input type="checkbox"/> No   URL: _____
Which social media accounts does your organisation have? <input type="checkbox"/> Facebook <input type="checkbox"/> Instagram <input type="checkbox"/> Twitter <input type="checkbox"/> TikTok <input type="checkbox"/> LinkedIn <input type="checkbox"/> You Tube <input type="checkbox"/> None



### 3. Request details

<input type="checkbox"/> Monetary <input type="checkbox"/> Supplies <input type="checkbox"/> Marketing gifts <input type="checkbox"/> Other _____
Ideal sponsorship/donation amount requested (please note that there is no guarantee or commitment by BF&M at the stage of the submission of this form): Amount requested \$ _____
Proposed sponsorship term: <input type="checkbox"/> One-time sponsorship/donation <input type="checkbox"/> Recurring sponsorship/donation
When are sponsorship/donation funds ideally needed (dd/mmm/yyyy):
Do you offer your sponsors sector exclusivity? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your proposal offer volunteer opportunities for BF&M employees? <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, please include in below details.
Please use the area below to provide a brief description of your sponsorship needs and why BF&M should consider a partnership with you. Please limit your response to 300 words.

Sign:	Date (dd/mmm/yyyy):
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Applications should be submitted via email to [csr@bfm.bm](mailto:csr@bfm.bm). Please allow our charitable giving committee time to review and respond to your request. Our aim is to return a response to you within 4 weeks. Should the request be time-sensitive, we will endeavour to get back to you at our earliest opportunity.