



**SREMS
COUNCIL**

Susquehanna Regional EMS Council, Inc.

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Endicott, NY 13760

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Request for Sponsorship for Educational Event

Instructions: Complete this form and return it with the agenda and/or brochure for the event.

Title of Event: _____

Dates and Times of Event: _____

Location of Event: _____

Organization Hosting: _____

Contact Name: _____ Phone: _____

Contact Email: _____

Address: _____

Amount of Money Requested: _____ Percentage of the Total Budget: _____

Percentage of Total Money Requested from Outside Organizations: _____

What the money will be used for: ☐ Administrative Costs

☐ Speaker Sponsorship

☐ Room Rental

Explain how SREMSC, Inc. will be recognized (publicity, reserved seats, etc.):

If not described in the brochure, who is the intended audience?

Other comments:

Signature of Organizer

Date

Printed Name

Title

Approved by: Executive Committee ☐

Date _____

Regional Council ☐

Date _____

Serving Broome, Chenango, and Tioga Counties.

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