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# Donation & Sponsorship Request Form

Please email completed form to [donations@citymarket.coop](mailto:donations@citymarket.coop) for consideration.

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**Today's Date:**

**Organization:**

**Non-Profit 501(c)(3):**      Yes (please supply certificate of exemption)      No

**Contact Person(s):**

**Mailing Address:**

**Phone Number(s):**

**Email:**

**Organization's  
Website:**

**Name of Event:**

**Date(s) of Event:**

**Number of  
People Attending:**

**Frequency of Event:**

**Type of Activity/Purpose of Event:**

**How does this activity/event relate to City Market's Global Ends? (See cover sheet):**

**Type of Donation Requested (please be specific) and Monetary Amount:**

**Special Needs or Requests:**

City Market frequently provides a gift card.

Would this be an appropriate item to donate to your event?

Yes

No

**For City Market Use Only**

Approved Amount:

Member Services staff name:

Date:

Notes: