SOUTH CAROLINA
FEDERAL
CREDIT UNION

Community Involvement Request Form

Today's Date: _____

Organization Requesting Financial Support: _____
What is the purpose of your organization? _____
Contact Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____ E-mail: _____

Name of Event/Program: _____
Date of Event: _____ Event Location: _____

Brief description/mission of event/program: _____
_____
_____

How does this event relate to simplifying peoples' lives and helping participants be "one step ahead" in critical areas of life?
_____
_____

Average or expected attendance at event? _____

List other major sponsors? _____
_____

Does the event offer South Carolina Federal exclusivity as the sole sponsoring financial institution? ☐ Yes ☐ No

Is your organization not-for-profit? Yes/No Does your organization have 501(c)(3) designation? ☐ Yes ☐ No

If financial support is not available, would your organization like to receive promotional or educational items from South Carolina Federal? ☐ Yes ☐ No

Do you anticipate this being an annual request? ☐ Yes ☐ No

Does your organization have any officers or decision makers who are South Carolina Federal managers or volunteers? If so, please describe those relationships. _____
_____

Please submit completed form along with supporting documents to:
Community Involvement Committee, Marketing Department
South Carolina Federal Credit Union
P.O. Box 190012
N. Charleston, SC 29419
E-mail: CommunityInvolvement@scfederal.org
Fax: 843-797-3368

****In order to be considered, requests must be received at least 90 days prior to event****