SPONSORSHIP REQUEST FORM

Thank you for considering Auto West Paint Supplies as a potential sponsorship partner. Our team will use this application form to assess incoming sponsorship requests. We will contact you directly if we require further information.

NAME _____ **PHONE** _____

EMAIL _____

CUSTOMER ID OR NAME _____ (If you are a current Auto West customer) **ABN** _____ (If applicable)

BUSINESS / EVENT / ORGANISATION / TEAM

_____

ADDRESS

_____

TYPE OF SPONSORSHIP

☐ PRODUCT SPONSORSHIP ☐ DONATION ☐ EVENT SPONSORSHIP OR SUPPORT

TELL US ABOUT YOUR SPONSORSHIP OPPORTUNITY

_____

PLEASE LIST YOUR CURRENT PARTNERS/SPONSORS (so we can identify potential conflicts of interest)

_____

YOUR LOCAL STORE

☐ PENRITH ☐ SMEATON GRANGE ☐ BATHURST ☐ BRENDALE

MEDIA USE

☐ If you are successful in securing a sponsorship from Auto West Paint Supplies, we require photos/media supplied for use in our marketing. Please check the box to agree.

Please email your completed form to amy@autowest.com.au