



# RONDOUT SAVINGS BANK

*always working for you and our community*

Organization: \_\_\_\_\_ Date: \_\_\_\_\_

Organization's Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Please be sure to include the following information:**

- Description of your organization, including mission and goals.
- Service Area of your organization
- Event/ Project Overview, please provide specific details about the event/ project that you are requesting sponsorship for.
- Sponsorship Levels

Are you a 501 (c)3 :  Yes  No

**Business Relationship with Rondout Savings Bank:**

- |  |  |
|--|--|
| <input type="checkbox"/> Business Checking | <input type="checkbox"/> Merchant Services       |
| <input type="checkbox"/> Business Savings  | <input type="checkbox"/> Remote Deposit Capture  |
| <input type="checkbox"/> Other Accounts    | <input type="checkbox"/> Other Bank Relationship |

Rondout Savings Bank Account that we may deposit funds into: # \_\_\_\_\_

To whom should the check be payable to: \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_

By what date do you need the contribution? \_\_\_\_\_

**Please E-Mail, Mail, or Drop- off Applications to:**

**Rondout Savings Bank**

**300 Broadway**

**Kingston, NY 12401**

**Attn: Dividends to the Community**

**Email: [Marketing@rondoutsavings.com](mailto:Marketing@rondoutsavings.com)**

**Phone: 845-331-0073**