



Paces Sheffield
Sponsorship Proposal

Named Person -
Sponsorship from – (name or company)
Preferred method of contact (please complete accordingly)
Email address: Tel. No. Mobile No. Postal address:
Title of Event/Activity
Date of activity/ event
Location of event/activity
Total amount of money being brought in by sponsorship
Cost of activity/event if any to us
Named person to undertake risk assessment (where required)
Named person to ensure that insurance/licencing requirements are met

If you would like assistance filling in this form, please contact

Natalie Yarrow

natalieyarrow@pacesheffield.org.uk or Telephone 0114 284 4488 Ext. 209

Signature of named person for responsible for leading on activity/event:

.....

Date:

.....

Signature of Funding Coordinator

.....

Date:

.....

Please return completed form to the Funding Team

Paces Sheffield

Pack Horse Lane

High Green

Sheffield

S35 3HY