DCCW CONVENTION SPONSORSHIP PROGRAM APPLICATION

PLEASE READ THE SPONSORSHIP GUIDELINES PRIOR TO COMPLETING/SUBMITTING APPLICATION

Applications for sponsorship must be postmarked no later than March 1, 2023

Complete this form and email (preferred) or mail to the address listed below, together with a **letter of recommendation** from **ONE** of the following: The president of your parish women's group, or its spiritual advisor, or your pastor or pastoral administrator. Applications are reviewed only when both the application <u>AND</u> recommendation letter are received. Applications are taken on basis of need and are limited to funds available. <u>All information is kept strictly confidential</u>. Only the Registration Chairs and the DCCW Sponsorship Committee have access to this information.

MAIL TO: Kathy Fazio, Sponsorship Committee Chair

Preferred Delivery: Submit via Email to: tommycreek2@infowest.com

<u>Or</u> mail to: 1339 S. 4575 West

Cedar City, UT 84720 For further info call or text 435.463.2785

| APPLICANT NAME: | EMAIL: | |
|---|---|------------------------|
| ADDRESS: | | |
| CITY: | STATE: | ZIP: |
| | PASTOR: | |
| | PHONE: | |
| | re financial need and why you would like to be financial need and why you would like to be financial need is needed, add a second sheet): | e sponsored and how yo |
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| HAVE YOU PREVIOUSLY RECEIVED A DCCW S | SPONSORSHIP?YES WHEN(yea | r)NO |
| I WOULD NEED SPONSORSHIP FOR THE FOL | LOWING: (check what is needed) | |
| Package AFull Registration (inclu | udes banquet)Package BSat | urday (Day) only |
| Package CBanquet (Only in combo | with Package B or D)Package DSu | nday Only |
| | | |
| HOTEL ACCOMMODATIONS—One n | night (double occupancy or more required) | |
| HOTEL ACCOMMODATIONS—One n Planned roommate(s): | | |

PLEASE NOTE: SPONSORSHIPS ARE NOT TRANSFERABLE. SEE REVERSE FOR ALL APPLICANT GUIDELINES