Co-Sponsorship Agreement Form

Please note: This document must be completed a minimum of 30 days in advance of events

Sponsoring Student	Organization	Co-	Sponsor Org./Department		
Name:		Name:			
Contact Person:		Contact Person	n:		
Email:		Email:			
Phone #:		Phone #:			
	Event Info	ormation			
Event Name:					
Date:					
Time:					
Location:					
Description:					
Learning Outcome:					
Admission Type (Please check): Student Only (ID's required) Open to Public Free Charged Admission					
Admission Fee (if applicable):					
	Reve	nue			
Please check here if N/A:	Γ				
Total Anticipated Revenue from					
Event:	Student Once in	ation.	Co Spanson One / Department		
Revenue Split (%)	<u>Student Organiz</u>	<u>auon</u>	Co-Sponsor Org./Department		
Revenue Spiit (70)					
	L				
1	Non-Financial Contri	ibutions (Pl	ease list)		
Please check here if N/A:		(
Student Organi	zation		Co-Sponsor Org./Department		
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	Financial Responsibility						
Expenses	<u>Student Organization</u> <u>Amount</u>	Check if Transfer Needed	Co-Sponsor Org./Department Amount	Check if Transfer Needed			
Venue Set-Up							
Publicity							
Catering E /E							
Performer Fee/Expenses							
Other (Please List)							
75 1							
Total	List Durings Manager of LIPD and	nto ot inform	24.00				
If transfer needed please list Business Manager or UBR contact information: Name:							
Phone #:							
Email:							
_							
Notes:							
Organizations funded by segregated fees cannot use these fees for academic, personal, political, commercial gain, or other purposes not authorized by UW-System policy.							
All e-signatures must be saved with the whole document and received from the party signing to SI Liaison. In signing this agreement, the co-sponsoring party agrees to the following: this event has been discussed with and all conditions approved by							
the student organization/department; and all sponsoring student organizations/departments will be listed on all promotional materials.							
Student Organization Representative:							
<u>Title:</u>							
Date:							
E-Signature:							
Co-Sponsor Org./Department Representative:							
<u>Title:</u>							
<u>Date:</u>							
E-Signature:	F-Signature:						