

The Children's Hospital of Philadelphia
Office of Government Affairs & Community Relations
Sponsorship Request Form

Name of Organization: _____

Contact Name: _____

E-mail: _____

Phone Number: _____

Address:

Reason for
Request: _____

Amount (\$\$) Requested: _____

What is the topic?

Date & Time of Event: _____

Location of Event: _____

Please fax this completed form to the Office of Government Affairs &
Community Relations at 267-426-5480.

If you have any questions, please contact Suzanne Ramsey at 267-426-6497.