

# SPONSORSHIP AGREEMENT

Limit one per troop. Completed form must be received by May 1st. For monetary donations, contact your membership manager before funds are solicited. Make 2 copies: Give one to the sponsor and one to the Girl Scouts of Middle Tennessee. The troop keeps the original.

## AGREEMENT STATEMENT

This agreement will be renewed annually.  New  Renewal

This agreement is between Girl Scouts of Middle Tennessee troop(s) #: \_\_\_\_\_

and (full legal name of sponsor): \_\_\_\_\_

If a church, please list denomination: \_\_\_\_\_

## PROVISIONS

**Sponsor:** check all that you are willing to provide to the troop.

Use of building and facilities:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Storage space            | <input type="checkbox"/> Bus/van                  | <input type="checkbox"/> Outdoor space |
| <input type="checkbox"/> Bulletin board space     | <input type="checkbox"/> Kitchen equipment        | <input type="checkbox"/> Photocopier   |
| <input type="checkbox"/> Space for adult meetings | <input type="checkbox"/> Space for troop meetings | <input type="checkbox"/> Cookie Booth  |
| <input type="checkbox"/> Other: _____             |   |  |

Use by adults of audio/visual equipment:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Projector screen | <input type="checkbox"/> VCR                | <input type="checkbox"/> PA System            |
| <input type="checkbox"/> Slide projector  | <input type="checkbox"/> Overhead projector | <input type="checkbox"/> Tape player/recorder |
| <input type="checkbox"/> Data projector   | <input type="checkbox"/> Other: _____       |   |

Program support:

- |  |  |
|--|--|
| <input type="checkbox"/> Assist in recruitment of girls and adults.  | <input type="checkbox"/> Provide program supplies.   |
| <input type="checkbox"/> Suggest qualified adults to serve as program consultants.                           | <input type="checkbox"/> Provide recognition opportunities for the Girl Scout program, girl members and adult volunteers in bulletins and newsletters. |
| <input type="checkbox"/> Identify one member of the sponsoring organization to serve as a liaison to troops. | <input type="checkbox"/> Other: _____  |

I would like the Girl Scout troop to:

- |   |  |
|---|--|
| <input type="checkbox"/> Perform flag ceremonies or other programs  | <input type="checkbox"/> Provide baby-sitters for meetings |
| <input type="checkbox"/> Provide refreshments for sponsor's meeting | <input type="checkbox"/> Clean-up projects                 |
| <input type="checkbox"/> Other: _____                               |  |

## SIGNATURE AUTHORIZATION

Print name of sponsor/representative and title: \_\_\_\_\_

Print sponsor's business mailing address: \_\_\_\_\_  
Street City State Zip

Sponsor representative signature: \_\_\_\_\_ Date: \_\_\_\_\_

Troop leader's signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SUBMISSION INSTRUCTIONS

Mail to: Girl Scouts of Middle Tennessee  
Attn: Volunteer Manager  
4522 Granny White Pike  
Nashville, TN 37204

Fax to: (615) 460-0255