



Community Involvement Application Form

Contact Information:

Name of Corporation: _____

Contact Name: _____ Position: _____

Mailing Address: _____ Postal Code: _____

Email: _____

Telephone #: _____ Fax: _____

Organization Information:

Are you currently a member of Pathwise Credit Union? YES___ NO___

Has Pathwise provided funding to your organization in the past? YES___ NO___

If YES, when and what for? _____

Are you requesting funds for a specific event? YES___ NO___

If YES, please specify: _____

What geographic area does your organization/event take place in? _____

Does a Pathwise Credit Union employee/board member work with your organization as an employee, volunteer or fundraiser? YES___ NO___

If YES, please give the name(s) and a brief outline of the capacity the employee filed:

Type of Request:

What type of assistance are you requesting?

- Sponsorship
- Donation
- Fundraising
- Partnership
- Other (please specify) _____

Funds requested from Pathwise: _____

Other types of assistance required: _____

Only those applications completed in full will be considered for appropriate giving.

Note: All applications will be reviewed and an answer will be provided within two weeks for submission.

Please submit applications via one of the following:

Mail: Pathwise Credit Union, Attention _____, 322 King Street West, Oshawa ON, L1H 7L1

Email: _____

Fax: 905-728-4441