

Event Information

1.	What is the event/request called:
2.	When do you need the request fulfilled?
3.	When will the event or request take place? If there are multiple dates for the event, please enter the first one.
4.	In what city or island will the event or request take place?
5.	Please describe the event or request and the type of sponsorship you're seeking (in-kind, monetary, etc. if monetary, list your requested amount). Describe how the proceeds of this event will be used and include the group of individuals or organization(s) that will benefit from this event. Describe how Aloha Air Cargo's donation and/or sponsorship would be recognized. Please describe the audience and expected number of participants for the event or request.
6.	Please list any other key supporters or sponsors for the event or request.

7.	Has Aloha Air Cargo provided support to this event or request previously?
	□ Yes □ No
8.	Name of any Aloha Air Cargo employees involved in the proposed project/event. Please describe
	any assistance provided (e.g., board member, volunteer, committee member).
rgani	zation Information (Required Info)
1.	Organization Name
2.	Organization Tax ID if organization is a non-profit:
3.	Organization Mailing Address
	Street Address:
	City: Zip code:
4.	Contact Information
	Contact Name:
	Email Address:
	Daytime Phone:
	Return completed form to mmiura@alohaaircargo.com or fax: 808-836-5159