



Application for Community Sponsorship Grant

Valley Health believes in being a good community partner and seeks to impact the health and well-being of the communities where we live and work. Through our Community Sponsorship Program, we are proud to support the needs of our communities by providing health-related grants to local organizations.

To apply for a community sponsorship grant, please complete this form and return it along with any other relevant information to: communityoutreach@valleyhealthlink.com, or by mail to: Valley Health Marketing & Communications, 333 W. Cork Street #212, Winchester, VA 22601.

Organization Name: _____

Indicate type of organization:
(please check all that apply)

- ☐ Community Service or health related not-for-profit
- ☐ Government entity including law enforcement or fire department
- ☐ School or educational institution
- ☐ Church or faith-based organization

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Phone Number: _____ Email: _____

Name of program/initiative/event for which you are requesting funding:

Date of program/event: _____ Deadline for request: _____

Amount Requested: _____

Description of program/initiative/event: (If appropriate, please include a summary of the project/event history including past attendance, money raised, demographic profile of participants.)

How will the program/initiative/event benefit the community?

Does this program complement Valley Health's mission and vision? ☐ Yes ☐ No

Please explain plans for recognizing Valley Health's support:

To discuss a program/initiative/event prior to submitting a request, please contact:

Michael Wade
(540) 536-5266
mwade@valleyhealthlink.com