

About you

Business / Organisation name: _____

Address: _____

Contact name/s: _____

Position: _____

Contact phone number: _____

Mobile: _____

E-mail: _____

About the event

Event title: _____

Event start and finish date(s): _____

Time: _____

Location of event: _____

Anticipated number of participants to event: _____

Summary of event (aims/objectives): _____

Promotional Opportunities for Coliban Water (if any): _____



Applicant Declaration

I _____, understand that use of the water trailer is subject to a suitable connection point being identified at the location requested. Requests should be made at least 4 weeks prior to the event. Coliban Water holds no responsibility for the Water Trailer becoming unavailable as a result of a breakdown or other unforeseen circumstances.

The sponsorship value of the Water Trailer is \$500 per day in kind.

Signed:

Print Name:

Date:

Please complete this request form and return to:

Marketing Officer
Coliban Water,
PO Box 2770, Bendigo DC VIC 3554

Tel: 1300 363 200, Fax: 5434 1341
www.coliban.com.au

Office use only

Form received:

Date:

Initials:

Request reviewed:

Date:

Initials:

Recommendation:

Yes / No:

Initials: