



2025-2026 SUNDAY HOSPITALITY SPONSORSHIP INTEREST FORM

We invite individuals, families, ministry groups, and local businesses to sponsor Sunday Coffee & Donuts at St. Hubert Catholic Community. Your support helps foster fellowship and connection after our 8:30 AM and 10:30 AM Masses during the school year. If you're interested in sponsoring a Sunday, please complete this form and return it to the parish office.

Sponsorship Guidelines

Please review the following guidelines before submitting your form:

- All required (*) fields must be completed.
- St. Hubert Catholic Community reserves the right to deny sponsorship applications or reschedule sponsor dates.

What We Provide:

- One 8' table with tablecloth and up to two chairs (upon request).
- A sponsor acknowledgment poster.
- A thank-you mention in our Flocknote eNewsletter.

Additional Guidelines for Business Sponsors:

- May be onsite from 7:30 AM–12:30 PM (includes setup and teardown).
- **Onsite sponsors must complete and return the Unaffiliated Organization Agreement with this interest form.**
- May display business cards and printed materials, but may not sell goods or services while onsite.
- Sponsors must remain at their designated table and allow individuals to approach on their own.

CONTACT INFORMATION

NAME (FIRST & LAST)*: _____

PHONE NUMBER*: _____ EMAIL ADDRESS*: _____

ARE YOU A REGISTERED PARISHIONER?*: YES NO

SPONSORING ON BEHALF OF A BUSINESS OR GROUP (IF APPLICABLE)

BUSINESS/GROUP NAME: _____

PRIMARY PRODUCT/SERVICE: _____

BUSINESS/GROUP ADDRESS: _____

SPONSORING DATE PREFERENECES

9/7, 9/21, 10/5, 10/12, 10/19, 11/2, 11/9, 11/16, 11/23, 11/30, 12/7, 12/21, 1/4, 1/11, 1/25, 2/1, 2/8, 2/15, 2/22, 3/1, 3/8, 3/15, 3/22, 4/12, 4/19, 4/26, 5/3, 5/17, 5/24

1ST CHOICE: _____ 2ND CHOICE: _____ 3RD CHOICE: _____

SPONSORSHIP DONATION

SUGGESTED MINIMUM DONATION: \$300

PAYABLE BY CHECK OR CREDIT CARD (PROCESSING FEE APPLIED TO CREDIT CARD TRANSACTIONS)

DONATION AMOUNT*: \$_____

ADDITIONAL OPTIONS

I WISH TO REMAIN ANONYMOUS

THIS SPONSORSHIP IS IN HONOR OR MEMORY OF SOMEONE:

IN HONOR OF: _____

IN MEMORY OF: _____

DO YOU NEED A TABLE? YES NO DO YOU NEED CHAIRS? YES NO

FOR OFFICE USE ONLY:

INTEREST FORM RECEIVED: _____ UNAFFILIATED FORM RECEIVED: _____ APPROVED: _____ SPONSOR DATE: _____

PAYMENT DATE: _____ PAYMENT METHOD: _____ PAYMENT AMOUNT: _____ FLOCKNOTE: _____ SIGN: _____