CITA Event Sponsorship Request Form

Send completed form to: citadmin@cita.utoronto.ca

Name of Event:	
Date of Event:	
Dute of Event.	
Location:	
Event Website:	
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	_
Summary of Event (Including Topic):	

Attach a copy of the scientific program if available.

Scientific and/or Outreach Ob	pjectives of the Event, Intende	d Audience, Additional Inform	ation:		
Host Organization(s)/Instituti	on(s):				
Organizer(s):					
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First Name	Last Name	Institution	Email Address		
Sponsorship Contact Person:					
		F 11.6.1.1	SI 4: 1		
Name	Institution	Email Address	Phone Number		

Number of Expected Participants/Attendees:			
Total Expected			
Number of Speakers			
Number of Students			
Amount Requested:			
Amount Requested.		I	
EVENT DUDGET			
EVENT BUDGET			
Revenues:			
Funding Source	es and Sponsors	Amount	
Registration Fees (if applicable)			
	_		
Expenses:			
Expense Item		Amount	