

PARTNERSHIP REQUEST FORM

Thank you for your interest in partnering with the Florida Lottery! Please fill out this form and email it, along with your official proposal, to partnerships@flalottery.com no later than 3 months prior to your event. Reminder: Please be sure to adhere to the Partnership Proposal Guidelines located on the Florida Lottery website. https://floridalottery.com/business/partnerships/proposal-guidelines

Section 1. General Information

Organization Name:			
Address:	City: State: Zip:		
Website:			
Primary Contact:	Phone:		
Email:			
FEI/EIN#:	Total Partnership Requested Amount:		

Partner must have the following items completed prior to a partnership agreement being approved by the Florida Lottery or the Lottery may decline the request:

- Partner must be an active registered vendor at the State of Florida's Sunbiz website.
- Partner must be an active registered vendor in the State of Florida's Vendor Information Portal (VIP) with an active vendor information number (VIN), and an active W9.
- Note: Partner must upload their active W9 into the VIP.
- Partner's FEI/EIN number, organization name and organization payment address must match the information on the active W9 form, and the organization information on this Incoming Partnership Request form.
- It is highly recommended that partners use this same information for registration in the VIP to avoid any payment delays.

Section 2. Organization Background Briefly describe your organization's background and mission.

What education levels does your organization impact? Select all that apply.					
Elementary School (K - 5th Grade)	Middle School (6 th – 8 th Grade)	High School (9 th – 12 th Grade)	Post-Secondary (College/Trade School Programs)		
Briefly describe what you hope to achieve through a partnership with the Lottery?					
Section 3. Event	Information				
Event Name:			Date(s):		
Location:		Estimated Number	of Attendees:		
Will Bright Futures recipi	ents be in attendance?	Yes	No 🔲		
Who typically attends? Provide brief description of audience demographic.					
Miscellaneous:					
Please briefly describe any other partnership information that you would like us to consider that is not captured in any other location on this incoming partnership request form.					