

SPONSORSHIP COMMITMENT FORM - KABALEGA INDEPENDENCE WEEK 2025

Event Dates: 1st – 4th October 2025

Location: Hoima City, Uganda

Organized by: Kabalega Foundation in partnership with Bunyoro-Kitara Kingdom and Hoima City Council

SPONSOR INFORMATION

Organization Name	
Contact Person	
Title/Position	
Email Address	
Phone Number	
Website (if any)	
Postal Address	

SPONSORSHIP CATEGORY

Please tick your selected sponsorship level:

- ☐ **Platinum Sponsor** – UGX _____
- ☐ **Gold Sponsor** – UGX _____
- ☐ **Silver Sponsor** – UGX _____
- ☐ **Bronze Sponsor** – UGX _____
- ☐ **Copper Sponsor** – UGX _____
- ☐ **Community Partner** – UGX _____
- ☐ **In-Kind Support** (please specify): _____

PAYMENT METHOD

- ☐ **Bank Transfer**
- ☐ **Cheque**
- ☐ **Mobile Money** (if applicable)
- ☐ **Other:** _____

Banking Details will be provided upon confirmation of sponsorship.

ACKNOWLEDGMENT & AUTHORIZATION

By signing this form, the sponsor agrees to support **Kabalega Independence Week 2025** in the selected category. The sponsor understands that sponsorship benefits will be activated upon confirmation of payment or signed MoU, and that all funds will be used for the implementation of the event and its legacy programs.

Authorized Representative Name: _____

Signature: _____

Date: _____

Official Stamp (if applicable): _____

Please scan and return the signed form to: ***partnerships@kabalegafoundation.org***