



Sponsorship Impact Reporting Form

Please complete the following fields after your sponsored event. This information is required for our records and future decision-making. Include as much detail as possible.

Event Information

Organization Name: _____

Event Title: _____

Date of Event: _____

Attendance Breakdown

Please indicate the number of attendees by category:

Number

Self-Advocate (SA) _____

Family Advocate (FA) _____

Professional _____

Other (Please specify): _____

Event Impact & Outcome

Briefly describe the overall outcome of the event and any key takeaways:

Participant quote or anecdote from an attendee

A short narrative of a notable incident or success story, a thank-you message, or an expression of appreciation: