

\$500⁰⁰



**SPONSORSHIP APPLICATION
FISCAL YEAR 2023 – 2024**

SUBMIT TO

City of Vicksburg
Attn: Office of the City Clerk
P. O. Box 150
Vicksburg, MS 39181-0150

Or email:
dnickson@vicksburg.org

INCOMPLETE APPLICATIONS WILL NOT BE FORWARDED TO THE COMMITTEE

OrganizationName: One Way Sober Living

Physical Address of the Event: 222 Berryman Road

Mailing Address: 111 Brookwood Drive

Telephone Number: 6014619905/6014619935

Website Address: onewaybh.org

Primary Contact Name: Crista Sturgis Lovette Title: Co-Founder

Telephone No: 6016181901

Email Address: clovette@onewaybh.org/jsanders@onewaybh.org

Secondary Contact Name: Jessica Sanders Title: Co-Founder

TelephoneNo: 6016189012

Email Address: jsanders@onewaybh.org

If you are applying on behalf of another organization, please provide contact information for that organization:

Organization: _____

Contact Name: _____

Telephone No: _____ Email Address: _____

Complete The Following Questions Regarding Your Request For City Sponsorship Consideration

Event Date: June 29, 2025
(Must be between October 1, 2023 – September 30, 2024)

1. Is your request for:

(Check all that apply)

☐ In-Kind Sponsorship (specify in question 6)

☒ Cash Sponsorship Amount Requested: \$500.00

2. Briefly state your organization's mission and purpose.

Our mission is to provide a safe, supportive, and structured living environment that fosters recovery, personal growth, and long-term sobriety. We are committed to empowering individuals to rebuild their lives with dignity, accountability, and community support as they transition from addiction to independence. We envision a future where every individual in recovery has access to a stable and nurturing home that promotes healing, personal responsibility, and lifelong recovery. Through compassion, structure, and peer support, we strive to be a beacon of hope and transformation in our community.

3. Describe the event in which funds are being requested to support.

We are hosting the Kick Addiction Kickball Tournament, a community-centered fundraiser designed to raise both awareness and funding in support of individuals recovering from substance use disorders. This event brings together local residents, organizations, and advocates in a family-friendly atmosphere to promote healthy living, reduce stigma around addiction, and directly support recovery services.

The primary goal of the tournament is to raise funds for our sober living program, which provides safe, structured housing and supportive services to individuals transitioning out of inpatient treatment. Proceeds from this event will help cover the cost of housing, life skills development, transportation, and peer recovery support—essentials for sustained recovery.

In addition to friendly competition on the field, the event will include educational booths, food vendors, music, recovery testimonials, and raffles—creating a vibrant and inclusive environment that highlights both the challenges and triumphs of recovery.

This event serves as a powerful platform to “kick” addiction and inspire hope by investing in second chances and sustainable recovery paths for those who need them most.

4. Explain how your organization and/or event further a charitable cause, economic or community growth, or serve a public interest? Our organization operates a sober living home, providing a safe, structured, and supportive environment for individuals in recovery from substance use disorders. Our mission is to help people rebuild their lives through accountability, stability, and a strong foundation of peer support. By offering affordable housing and recovery-focused living, we serve a vulnerable population, many of whom would otherwise face homelessness, incarceration, or relapse without access to these services.

In addition to direct support for residents, our organization actively engages with the broader community through public service and awareness events every 5th Sunday. These events include community clean-ups, food drives, educational outreach, and collaborations with local churches, nonprofits, and recovery advocates. These initiatives foster civic engagement, reduce stigma surrounding addiction, and promote public health awareness.

Events like our Kick Addiction Kickball Tournament further our mission by raising essential funds and bringing people together in support of a common goal: to fight addiction and support recovery. They stimulate economic participation, encourage local business involvement, and create opportunities for education and connection within the community.

By combining recovery housing with active community outreach, our organization not only helps individuals reintegrate into society with purpose and dignity but also contributes to community safety, economic resilience, and public wellness.

5. Provide detail on how the requested funds will be used to support the event. The requested \$500 will be used to help cover essential costs associated with hosting the Kick Addiction Kickball Tournament, a community awareness and fundraising event aimed at reducing stigma, promoting recovery, and supporting sober living residents. Specific expenses include: Securing a safe, public space for the tournament and meeting local

requirements for public events.

1. Equipment & Supplies – \$125

- **Kickballs, bases, cones, team bibs, scoreboards, and signage to ensure smooth tournament operation.**

2. Promotional Materials – \$100

- **Flyers, banners, social media ads, and printing costs to help spread awareness about the event, substance use recovery, and mental health.**

3. Refreshments & Water – \$75

- **Bottled water and healthy snacks for participants and volunteers.**

4. Community Outreach Booths & Awareness Materials – \$50

- **Educational handouts, wristbands, and recovery-focused resources available to the public during the event.**

These funds will allow us to create an engaging, inclusive event that not only raises awareness around addiction and mental illness but also directly supports individuals living in our sober living home. The event will promote community healing, reduce stigma, and encourage open conversations about recovery and wellness.

6. Select all in-kind services the organization is requesting for the event:

☒ a) Park and facilities fees

☒ b) Park Personnel (maintenance and building attendants)

☐ c) Police Personnel

☐ d) Fire Personnel

☐ e) Other services not listed (please specify) _____

☐ f) Not requesting in-kind services

7. Identify and provide all other funding requests for this event. Provide attachments if needed.

Source	Pending	Approved	Dollar Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$

8. Anticipated Attendance: 50-75 participants

9. Explain in detail how the event, program, or exhibition marketing plan will promote the City of

Vicksburg.

The Kick Addiction Kickball Tournament is more than a community sporting event—it is a public awareness initiative designed to promote sobriety, mental health education, and civic unity. Our marketing plan aims to position the City as a progressive, health-conscious, and community-driven municipality that prioritizes wellness, public safety, and inclusivity.

1. Strengthening the City's Image:

By supporting and promoting this event, the City will be recognized as an advocate for mental health and addiction recovery, aligning with growing national and regional conversations about the opioid crisis, mental illness, and community wellness. This event demonstrates that the City cares about the long-term well-being of its residents—not just through enforcement, but through prevention, education, and support.

2. Community Safety and Crime Reduction:

Substance abuse and untreated mental illness are linked to homelessness, unemployment, and criminal activity. Our tournament emphasizes prevention and recovery, which are key to reducing these social challenges. Promoting this event allows the City to be seen as taking a proactive stance on crime reduction—supporting recovery programs that reduce recidivism and help residents reintegrate successfully into society.

3. Law Enforcement Engagement:

As part of our outreach, we plan to invite local police officers and first responders to attend and engage with the public in a non-enforcement setting. Officers can attend educational booths about mental health and substance abuse, helping to build empathy, reduce stigma, and foster more effective and compassionate community policing. This will highlight the City's commitment to training and informed engagement with vulnerable populations.

4. Visibility Through Marketing Channels:

The event will be promoted widely using a combination of:

- Local radio, newspapers, and online news outlets
- Flyers in local businesses, churches, schools, and community centers
- Social media campaigns tagging the City and its leadership as supporters
- Partnerships with mental health and addiction nonprofits, broadening the reach

By positioning the City as a co-sponsor or supporter, all promotional materials and press coverage will reflect positively on the municipality as a leader in recovery support and community health.

5. Community Building & Economic Impact:

The tournament will attract families, businesses, and nonprofits to gather in a safe, healthy, and family-friendly environment. This fosters local pride, increases use of public parks or recreation facilities, and creates an economic ripple effect through vendor sales, local promotions, and potential sponsorships. It's a celebration that

brings diverse parts of the community together in a positive, inclusive environment, strengthening neighborhood bonds.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

The information provided in this application is for the purpose of obtaining sponsorship funding from the City of Vicksburg on behalf of the undersigned. Each undersigned representative warrants the information provided within this application and its attachments are true and complete until a written notice of change is provided to the City of Vicksburg. The City of Vicksburg is authorized to make all inquiries necessary to verify the accuracy of the provided information.

5/7/2025

Requestor Date

Printed Name of Requestor from Above Crista Sturgis Lovette and Jessica Sanders

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) One Way Sober Living Home	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 111 Brookwood Drive	6 City, state, and ZIP code Vicksburg, Ms 39183
7 List account number(s) here (optional)		
Requester's name and address (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
			-					
or								
Employer identification number								
9	9	-	3	8	9	1	3	5 8

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Jessica Sanders</i>	Date <i>1/15/25</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they