

Community Fundraising Proposal Form

Thank you for your interest in helping enrich the lives of children and families in our community! Please complete this event application for consideration at least 14 days prior to the event. Incomplete applications will not be approved. The Outreach Manager will contact you within five business days of your submission.

Contact Information	
Business/Organization Name:	
Phone:	Email:
Event Information	
Event Name:	
Event Description:	
Location & Address:	
Expected Attendance:	
Event Audience:	
How do you plan to promote th	e event?
	lved with this event? If yes, please list those involved:
Expected involvement from the	Home:
Financial Information	
Please indicate how you will ger	nerate funds for the Home. Proceeds from events should be presented to the
· · · · · · · · · · · · · · · · · · ·	event, unless otherwise agreed upon.
Proceeds will come from:	
	ket Sales/Entry Fee, what percentage will be donated? Home through this event: \$
Event Organizer	 Date