

2022 Third Party Fundraising Event Application Form

Event Application 10

1. SPONSOR INFORMATION	
Name of sponsoring organization/individu	ual:
Contact person:	
	Fax:
	Web site:
2. EVENT INFORMATION Name of event:	
Type of event:	
Brief description of event:	
Location:	
	narged:
	nization to help plan, manage or conduct the event or to solicit
Name(s) of any organization with whom yevent:	you will have any contract or agreement in relation to the
	event? If so, who will be coordinating?
Who is your target audience:	Estimated attendance:
Is a Special Event Liquor License require	d for your event? 🗌 Yes 🔲 No
(Please attach approvals by local authority	ties and evidence of insurance.)

3. FINANCIAL INFORMATION: Please estimate:		
Total proceeds:	A. \$	
Expenses (include costs such as printing, food, entertainment, equipment rental, promotion, etc.):	B. \$	
Anticipated net proceeds (A minus B):	C. \$	
Amount/percentage of net proceeds donated (Sponsor is not liable for amount):	D	%
Anticipated date of your donation (within 45 days 5. Signature: Until written permission has been solicited in the name of Childhelp or any of its factorized.	granted by Childhelp, co	ntributions may not be
Information provided on this form is correct and	accurately describes the	proposed event.
Signature Da	te	

Thank you for supporting Childhelp's mission:

Childhelp exists to meet the physical, emotional, educational and spiritual needs of abused, neglected and at-risk children. We focus our efforts on advocacy, prevention, treatment and community outreach. For more information please contact Leah Digirolamo at LDigirolamo@childhelp.org