

THIRD PARTY EVENTS - FUNDRAISING EVENT PROPOSAL

We appreciate your willingness to host an event to benefit the vulnerable kids and families of Kentucky! Please complete this event proposal at least two weeks prior to the event by filling the form and sending to our Director of Events and Community Involvement at liz.nickely@maryhurst.org. Liz will contact you ASAP upon receiving.

| Event Title: Event Overview: Date(s): Time: | | | | | |
|--|---|---|--|--------------------------|--|
| | | Location & Address: | | | |
| | | Anticipated Attendance: Who is Your Audience? How do you plan to promote the event? Are there other nonprofits involved with this event? If yes, please list the other orgs: Requested Maryhurst Involvement/Attendees: | | | |
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| | | | | Contact Information | |
| | | | | Your Business/Org. Name: | |
| Address: | | | | | |
| City/State/Zip: | | | | | |
| Organizer Name: | Phone: | | | | |
| Email Address: | Website: | | | | |
| | | | | | |
| Financial Information | | | | | |
| We request proceeds from events be presented to Maryhurs | t within 30 days after the event, unless otherwise agreed upon. | | | | |
| Proceeds will come from: ☐ Admission Fee | □ Raffle/Drawing □ Auction □ Donation Drive | | | | |
| If generating funds through Admission Fee, what | t percentage will be donated? | | | | |
| Estimated total donation to Maryhurst: \$ | | | | | |
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| | | | | | |
| Event Organizer | Date | | | | |

By filling out and signing this proposal form, you acknowledge that you have read and agree to our third party fundraiser guidelines.