## **Charitable Partner Signup Form**

Please fill out the form below so we can start the evaluation process for your 501(c)3 charity.

Only those charitable organizations that have submitted the Charity Partner form will be eligible for approval.

We make every effort to process the form within three of our business days.

Thank you for helping to make our community and the surrounding area a better place to live for all of us!

• All information blocks with a \* must be filled out before the evaluation process can start.

Today's Date:
ORGANIZATION INFORMATION
Name of Organization*:
Address of Organization*:
Street Address*:
Website for the Organization*:
Overall Description / Goals of the Organization
Please provide your 501(c)3 Tax ID number*:
When do you want to start your 30 days sign up period?*
When do you want to pick up the gift certificate?*
Who is going to pick up the gift certificate?—THIS INDIVIDUAL WILL BE THE ONLY PERSON WHO CAN COLLECT THE GIFT CERTIFICATE.
Name*

## CONTACT INFORMATION—TWO ARE REQUIRED Are you the primary contact? What is the best way to communicate with you?\* Phone\* \_\_\_\_\_\_ Secondary Contact—Name\* Secondary Contact—Email\* Secondary Contact—Phone\* \_\_\_\_\_ **EVENT INFORMATION** Contribution / Donation deadline date\* \_\_\_\_\_\_ Please give us an overview of the fundraiser\* Official title of the event\* Date of the event\* \_\_\_\_\_ Start time of the event: Ending time of the event\* Address of the event\* \_\_\_\_\_ Is there a separate website/landing page devoted to this event? If so, please list

Is there a separate contact email setup for the event? \_\_\_\_\_

What is the expected attendance at the event?

Has the organization received a donation from our business in the past?
If so, what was the gift/amount?
How will the organization support the event? (i.e. Organization Website, Special Website / Landing Page, Facebook, Twitter, Special Email Campaign, etc.)
Please outline the strategy the organization will use to promote the event:
Please list the different levels of involvement you are making available to us:
Is there anything else you would like to share concerning this event?
Which of our social media outlets would you like us to use to support your event?
If you would like for us to support your event through our social media outlets, do we have permission to use your logo/event description to promote this event? Please outline limitations if any.
If you would like us to promote your event throughout social media outlets, how are you going to encourage your organization to support our social media through Facebook "Likes," followers to our Twitter account?
How will our donation / informational materials be displayed at the event?
When will we be notified of the winner(s) of our contribution?*
Please provide the name and email address of the winner(s) after the event so that we can congratulate them.

Who is going to pick up the contribution/donation?*
Date & time you are going to pick-up the contribution/donation*
AGREEMENT
By submitting this donation request form, I fully agree that any donation received is not to be used for resale and that all contributions/donations received from our business are for use by the organization noted above. I also state that I have the authority from the above-listed organization to enter into this agreement. My Name/address/phone and email address is listed as primary contact on this form*
Agreement Signature / Date*:
FND

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