

**West Side Ecumenical Ministry
Third-Party Fundraiser
Event Proposal/Agreement Form**

Thank you so very much for thinking of West Side Ecumenical Ministry (WSEM) as the beneficiary of your upcoming fundraising event. We appreciate your willingness to support our fellow Greater Clevelanders in need by making a financial contribution to WSEM. We ask that all individuals and organizations **complete and submit this Event Agreement Form** to our Development Department for approval at least 30 days prior to including WSEM as the beneficiary of your event. This will help us establish expectations for all parties involved. Once the Development Department has received this form, you will receive a follow-up phone call and a letter of understanding from WSEM. The letter will confirm approval of the event and provide you with documentation that the event is authorized by WSEM.

As the event organizer, we ask that you:

- Plan, organize, staff, execute and promote the event at NO cost to WSEM;
- Designate full proceeds to WSEM and/or another partnering approved not-for-profit organizations(s);
- Conduct your fundraising event in compliance with all federal, state and local laws;
- Obtain all necessary permits and/or licenses required by law for this event;
- Use the WSEM name, logo or other information in promoting the event only after obtaining approval from West Side Ecumenical Ministry;
- Do not solicit funds door-to-door or using telemarketing methods;
- Do not represent yourself as a representative of WSEM;
- Clearly disclose what portion of the donation will be given to WSEM and agree to deliver monies raised for WSEM within 30 days of the event payable to West Side Ecumenical Ministry.

West Side Ecumenical Ministry:

- Will provide you with a signed agreement and a letter authoring you to host your event, giving you credibility in your community;
- Will provide you with advice and expertise in event planning;
- May provide promotional materials including brochures, newsletters, banners, balloons etc., *when available*;
- Reserves the right to decline any fundraising proposal that may compete with an existing established event or that is not in line with our mission;
- Does not obtain any third party licenses or insurance on behalf of third party fundraisers;
- Does not participate in cause-related combination for-profit/not-for-profit sales ventures.
- Assumes no legal liability or financial liability associated with this event;

Please complete and submit the form below to:

West Side Ecumenical Ministry
Development Department
5209 Detroit Avenue
Cleveland, Ohio 44102

Fax Number: (216) 651-4145
Office Number: (216) 651-2037, Ext. 357

EVENT HOST INFORMATION: (Please print or type)

Name of Individual/Group/Organization: _____

Contact Person: _____ Title: _____

Email: _____ Website: _____

Company: _____

Address: _____

Work #: _____ Cell#: _____ Home #: _____

EVENT INFORMATION:

Event Name & Brief Description:

Date & Time of Event: _____

Location & Address: _____

Number of Estimated Guests/Attendees: _____

Target Market: (general public, customers, family/friends):

Frequency of Event: _____ One Time _____ Monthly _____ Other

Is this the first year of your event? _____ Yes _____ No

If No, please specify who received funds in the past and what amount:

Will proceeds from your event be donated exclusively to WSEM?

Yes No

If No, please list the other charities/organizations that will benefit from your event and how the proceeds will be divided.

How will the event be publicized?

How will funds be raised? (Check all applicable)

Cash Donations Event Sponsorship Live/Silent Auction

Merchandise Sales Raffle Ticket Sales

Other, (Please Explain):

Will you require gift acknowledgements for tax purposes for this event?

Yes No

If Yes, please specify:

ORGANIZATION'S HISTORY:

Brief description of your organization – size, how long in existence:

Why I, we want to hold this event:

EVENT DETAILS:

Financial Fundraising Information:

Total Projected Gross Revenue (before expenses) \$ _____

Projected Expenses: \$ _____ Insurance: \$ _____
Printing: \$ _____ Licenses: \$ _____ Food: \$ _____
Rentals: \$ _____ Prizes: \$ _____ Other: \$ _____

Total Projected Expenses: \$ _____
Estimated date of donation: _____ Host Signature: _____

Promotional Materials Requested (Check all that apply):

_____ Banner _____ WSEM Table Cloth
_____ WSEM Logo (All print materials must be approved by WSEM)
_____ WSEM Table Top Marketing Display
_____ Brochures _____ Bookmarks _____ Balloons (Not always available)

Marketing Support from WSEM:

Yes No
_____ Do you want your event listed on the WSEM Website?
_____ Do you want us to include your event in our publications?
_____ Do you want us to send out a Press release on the event?

Would you like a formal check presentation or an WSEM representative to address your group?
_____ Yes _____ No

If yes, please answer below:

Place: _____ Address: _____
Time: _____ Date: _____

Share a WSEM Story with Us (optional)

Do you know someone who has benefitted from the services provided by WSEM? Explain:

AGREEMENT

I fully understand and support the third party event guidelines of WSEM as outlined here in the Event Proposal and Agreement Form. I will not engage in any third party event for WSEM without prior approval from West Side Ecumenical Ministry.

Note: WSEM will investigate any person who is alleged to be using its name to deceive the public to make a personal profit.

Signature of Event Host: _____ Date: _____

For Office Use Only:

Approved By: _____ Date: _____