



Benefit Fundraising Event Application

This form must be completed and approved by the SARMHC, Inc. before any printed materials or sponsors are obtained. We reserve the right to reject any fundraiser.

Sponsoring Organization: _____

Address: _____

Contact Person: _____ Title: _____

Phone Number: (H) _____ (W) _____

Size of Membership: _____

Name of Event: _____

Brief Description of Event: _____

Date of Event: _____ Time of Event: _____ Rain Date: _____

Location of Event: _____

Would you like a representative of the SARMHC, Inc. present? ___ Yes ___ No

Budgeted Cost of Event: _____

Gross: _____

Net: _____

Percentage to be donated to the SARMHC, Inc.: _____

Donation to be made SARMHC, Inc. within _____ days after completion of the fundraising event and to provide a written accounting of the fundraising event.

Sponsor is authorized to use the name “Southern Appalachian Ronald McDonald House Charities, Inc.” only in connection with the fundraising event, and only until the earlier of the completion of the fundraising event or the termination of this agreement.

I have read the fundraising guidelines outlined on the back of this form and as a representative of _____, I understand and will abide by these guidelines.

(Print) Organization Representative, Title

Date

(Sign) Organization Representative, Title

Date

SARMHC, Inc. Representative, Title

Date

Please return forms to:

1. E. Rowena Bailey
Executive Director
Southern Appalachian Ronald McDonald House Charities, Inc. (SARMHC, Inc.)
418 N. State of Franklin Rd.
Johnson City, TN 37604

Or

2. rmhouse418@rmhsa.org



Special Event Approval Policy Guidelines

The Southern Appalachian Ronald McDonald House Charities, Inc. is pleased to be selected as the beneficiary of financial support from special fundraising programs, events or projects by generous individuals, groups and organizations.

In order to ensure that all proposed fundraising events or appeals are registered and authorized, we require:

1. Completion and return of the Approval Form for review and consideration of authorization to conduct any event or appeal. This should be submitted a minimum of 60 days prior to date of the event.
2. Use of our name, logo or any other term implying endorsement by or support of the SARMHC, Inc. is not authorized except by specific approval.
3. No conflict with government regulations or licensing
4. No commercialism which would reflect poorly on the SARMHC, Inc.
5. No exploitation of children and families utilizing the SARMHC, Inc.
6. Advance authorization is required for any reproduction of logo or name prior to printing or release to news media
7. Event sponsor understands that the SARMHC, Inc. assumes no responsibility for promoting the event or effort
8. Event sponsor agrees to obtaining all required permits or licenses
9. Event sponsor/organizer/organization holding an event intended to benefit the SARMHC, Inc. agrees to indemnify, defend and hold SARMHC, Inc. harmless against and in respect of any and all claims, demands, losses, costs, expenses, obligations, liabilities, damages, recoveries and deficiencies, including interest, penalties and reasonable attorney's fees that shall be incurred or suffered by the SARMHC, Inc. which arise, result from or relate to applicants' performance of its agreement as specified in these guidelines and the Special Event Approval Form.

Exceptions to the above policy may be granted only after review by the SARMHC, Inc. Executive Director, Fundraising Committee, or Board of Directors. Such exceptions, if granted, must be in writing.

For SARMHC, Inc. Use Only

Approved YES NO **Denied** YES NO **Amended** YES NO

SARMHC, Inc. Representative

Date

Title