** Community Fundraising Event Agreement**

*Susan G. Komen Charlotte® is accountable to the public for all fundraising activities using our name. The following information will be used to determine if and how our office will be able to participate, and if a Community Fundraising Event Agreement is required.*

**(please print)**

**Host/Organizer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website:

**Event Title/Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is invited to attend:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Percentage donated to Komen Charlotte:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide detailed description of event that you would like used in promotion of the event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fundraising GOAL**: \_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fundraising Activities: (please be as specific as possible regarding how funds will be raised and what percentage/portion will go to Komen Charlotte)**:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Every Community partner is responsible for their own event Publicity. Depending on the Fundrising goal, Komen Charlotte will enhance Partner’s efforts through Komen promotional venues (see chart). Please indicate how you will promote your event:**

* Promo materials (brochures, posters, etc…)  Standard media (radio/TV/newspaper)
* Social media (include Facebook and Twitter account names, etc…)
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***All materials using Susan G. Komen Charlotte or Komen Charlotte/logo must be approved by the Marketing Director of Komen Charlotte prior to production/ distribution. Komen Charlotte must provide all Susan G. Komen logos prior to production and distribution. Send proofs to Lynda Stadler at l.stadler@komencharlotte.org.***

**PLEASE LIST event sponsors/underwriters?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE LIST other charitable organizations THAT WILL be present or benefit:** Please describe extent to which each will benefit:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guaranteed Minimum Donation:**

In order for Komen Charlotte to be involved and provide available resources and promotional benefits, please select one of the following options:

* $1 to $249 ****Use of Komen Charlotte name on promotional materials

****Breast health educational materials

* $250 to $999 ****Breast health educational materials

****Use of Komen Charlotte name on promotional materials

**** Event promotion once on Komen Charlotte Calendar of Events

**** Event promotion in one Komen Charlotte E-Newsletter

**** Event promotion once on social media

* $1,000 to $2,499 ****  Breast health educational materials

**** Use of Komen Charlotte logo on promotional materials

**** Event promotion in Komen Charlotte Calendar of Events in one

****E-Newsletter and on website

**** Event promotion two times on social media

**** Komen Charlotte table display & volunteer (based on availability)

* $2,500 to $4,000 **** Breast health educational materials

**** Use of Komen Charlotte logo on promotional materials

**** Event Promotion once on Komen Charlotte Calendar of Events in

****E-Newsletter, on website and min. two times on Social Media

**** Komen Charlotte table display and volunteer(s)

**** Survivor speaker (based upon availability)

**** Komen Charlotte banner for event display (if available)

* $4,000 and more **Discuss with staff for more information**

**Insurance:**

Event organizers are required to obtain the necessary permits and insurance. Komen Charlotte and all related entities cannot assume any type of liability for your event.

A Certificate of Liability Insurance should be submitted with the signed copy of the Agreement.

Event organizer has read the enclosed Third Party Event Guidelines and agrees to abide by them. Susan G. Komen Charlotte ® is not liable to any party or vendor for any fees, costs, or payments of any kind; and Applicant agrees to indemnify and hold harmless Komen Charlotte and Susan G. Komen® national organization against any claims by third parties or vendors for such fees, costs, or payments incurred pursuant to this Agreement.

Please contact Komen Charlotte with any questions or concerns that you may have regarding insurance requirements.

Event Organizer Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return completed form to:** Komen Charlotte

ATTN: Megan Brandenburg

2316 Randolph Road

Charlotte, NC 28207

**via fax:** (704) 347-8145 **via e-mail:** [m.brandenburg@komencharlotte.org](mailto:m.brandenburg@komencharlotte.org)

**Please send fundraising check to:**

Komen Charlotte

ATTN: Megan Brandenburg

2316 Randolph Road

Charlotte, NC 28207

**\*\* Please include the name of the event in the memo line of the fundraising check \*\***

THIS SECTION FOR KOMEN CHARLOTTE USE ONLY

**VOLUNTEERs:**

Number of volunteers needed:

Volunteers are needed to:

* staff information table/hand out materials/operate prize wheel
* speak to attendees/make a presentation

 Volunteers are not needed

**MATERIALS NEEDED:**

 None  General  Patient  Survivor  Health professional

 Young adults  Children  African-American  Hispanic

**ADDITIONAL NEEDs:**

 Supplies bin  Prize wheel  Tri-fold table display  Door prizes

 Give away items  Other:

**AFFILIATE EVENT PROMOTION:**

 Affiliate online calendar

 E-Newsletter Approx. date:

 Facebook/Twitter Approx. date: