



Lupus Foundation of America, Inc.
Third-Party Fundraising Application

NAME OF CONTACT PERSON & ORGANIZATION:	MAILING ADDRESS:
TELEPHONE	
HOME:	FAX:
WORK:	EMAIL ADDRESS:
CELL:	NAME OF EVENT:

THE FOLLOWING INFORMATION IS REQUIRED BY OUR FUND DEVELOPMENT COMMITTEE
TO EVALUATE AND DETERMINE THE CHAPTER'S INVOLVEMENT.

EVENT ORGANIZER INFORMATION	
WHO IS ORGANIZING THIS EVENT?	COMPANY _____ ORGANIZATION _____ INDIVIDUAL _____
WHEN WAS YOUR BUSINESS/ORGANIZATION FOUNDED?	_____
WHAT IS THE NATURE OF YOUR BUSINESS/ORGANIZATION?	_____
HOW MANY EMPLOYEES OR MEMBERS IN YOUR GROUP?	_____
WEBSITE ADDRESS:	_____
REASON FOR SUPPORTING THE LFA, GREATER OHIO CHAPTER, INC. THROUGH A COMMUNITY FUNDRAISING EVENT:	_____ _____

EVENT INFORMATION	
DATE OF THE EVENT:	_____
START TIME:	_____ END TIME: _____
LOCATION AND ADDRESS OF THE EVENT:	_____ _____
TARGET AUDIENCE FOR THE EVENT:	_____
EXPECTED NUMBER OF PARTICIPANTS:	_____
WHAT TYPE OF EVENT ARE YOU STAGING?	One Time Event _____ Annual Event _____
IS THIS THE FIRST YEAR OF YOUR EVENT?	YES _____ NO _____
WHAT WAS YOUR PREVIOUS BENEFICIARY?	_____

WHO IS RESPONSIBLE FOR THE EVENT? _____

WILL ALCOHOL BE AVAILABLE AT THE EVENT? YES _____ NO _____

HOW WILL YOU BE PROMOTING THE EVENT? _____

WILL YOU BE PROMOTING IT? LOCALLY _____ REGIONALLY _____ NATIONALLY _____

FINANCIAL INFORMATION

HOW WILL FUNDS BE RAISED: Pledges _____ Silent Auction _____ Live Auction _____
 Ticket Sales _____ Donations _____ Product Sales _____
 Other (Please Explain): _____

GAMING EVENTS: If there is to be any gaming at your event, a gaming license is required by law (please see Terms & Conditions for more information.) Please indicate if you intend to have any of the following activities at your event:
 Raffle _____ 50/50 Draw _____ Bingo _____

PROJECTED FINANCIAL INFORMATION:
 TOTAL REVENUE _____ TOTAL EXPENSES _____

HOW MUCH DO YOU PLAN TO CONTRIBUTE TO THE CHAPTER? _____

ARE THE FUNDS TO BE RESTRICTED YES _____ NO _____

If you answered yes, what program? _____

WILL THE PROCEEDS FROM THE EVENT ONLY BE DONATED TO THE CHAPTER? YES _____ NO _____

If no, what other charities will be involved? _____

ARE YOU APPROACHING SPONSORS FOR YOUR EVENT? YES _____ NO _____

If yes, please list organizations being approached: _____

WILL YOU REQUIRE TAX RECEIPTS FOR THIS EVENT? YES _____ NO _____

NOTE: Tax Receipts will be issued according to IRS regulations and must be pre-approved by the Chapter. Please see Terms and Conditions for more information.

LFA, GREATER OHIO CHAPTER INFORMATION

WHAT ARE YOUR EXPECTATIONS OF THE CHAPTER? _____

NOTE: The Chapter involvement in your event will be subject to availability and based on event specific details. Please see Terms and Conditions for more information.

WOULD YOU REQUIRE THE CHAPTER NAME OR LOGO FOR PROMOTIONAL USE? YES _____ NO _____

IF YES, on what type of materials? Please specify: _____

NOTE: The Chapter must first approve the use of the Chapter name or logo on all materials. Please see Terms & Conditions for more information.

WHAT MATERIALS FROM THE CHAPTER WOULD BE USEFUL TO YOUR EVENT? PLEASE INDICATE QUANTITIES.

Bracelets _____ Brochures _____ Annual Reports _____

Other: _____

OTHER SUPPORT YOU WOULD ASK OF THE CHAPTER? _____

OTHER INFORMATION YOU THINK THE CHAPTER SHOULD KNOW REGARDING THE EVENT?

TERMS AND CONDITIONS

1. All projects must be ethical and compatible with the LFA's mission and values. The public perception of the activity must not be injurious to the LFA, Greater Ohio Chapter, Inc. ("the Chapter") or the LFA.
2. The Chapter requires that the company/individual/group organizing the event or program is using satisfactory financial controls. The financial records and bank information for the event must be available to the Chapter if requested.
3. The event should be financially viable in the opinion of the Chapter. The Chapter reserves the right to withhold the use of its name and/or logo from any event, which it feels is not financially or otherwise appropriate.
4. All funds must be received by the Chapter no later than 30 calendar days after the day of the event.
5. Use of the funds received by the Chapter from the event, will be determined solely by the Chapter.
6. The Chapter must have full control over the issuing of tax-receipts in accordance with the Internal Revenue Service (IRS) rules and regulations. All tax-receipting issues must be agreed upon and documented before the Chapter approval of the event can be given. Where the Chapter is issuing tax receipts, all revenue checks must be made payable directly to the LFA, Greater Cleveland Chapter, Inc. The Chapter does not issue tax receipts for in-kind donations or event sponsorship agreements.
7. The Chapter must give approval to all materials and advertising copy that uses the Chapter name and/or logo prior to publication and/or distribution (including electronic mailing and websites).
8. The Chapter involvement (both staff and volunteer) as well as expected time commitments must be agreed upon prior to the commencement of the event. Decisions around the Chapter involvement for each event will be determined at the Chapter's discretion based on factors such as availability, size and nature of event, etc.
9. Because state and local governments control all charitable gaming activities, organizers of any event that include gaming activities as defined by the state and local government must acquire the proper license(s) from their respective governmental agencies.
10. The Chapter will not secure liquor licenses for any third party event.
11. The organizing group or individual should acquire their own insurance and be able to produce proof if requested.
12. The Chapter assumes no legal or financial liability associated with the event.
13. We are happy to help you market the event through our normal venues. Press release, email our list serves, post on website, post on our e-newsletter ect.
14. All checks should be made payable to LFA GOC if the party intends to use it as a tax advantage.
15. The Chapter can process credit cards at the event or prior.
16. The Chapter can handle all funds and keep records via a classification on quick books.
17. Any photos taken should have a photo release signed by participants.
18. If games of chance are present, it may require a gambling license. Please verify with the chapter for approval.

By signing this document, I agree to the collection of the preceding information to allow the Chapter to evaluate the event and the level of the Chapter's involvement. This information may be disclosed to employees and agents of the Chapter as necessary to perform this evaluation and any requested activities. I am aware that this information will be kept for seven (7) years by the Chapter. I also agree to the Terms and Conditions outlined above.

Signature of Event Organizer

Date

President/CEO Lupus Foundation of America, Greater Ohio Chapter Inc.

Date

FORMS CAN BE FAXED TO: (440-717-0186) OR E-MAILED TO Victoria@lupusgreaterohio.org. IF E-MAILED, PLEASE MAIL ORIGINAL SIGNED FORMS TO:

Name
LFA, Greater Ohio Chapter, Inc.
12930 Chippewa Road
Brecksville, Ohio 44141