

## Contact Information

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

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

\_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Event Information

Name of Event: \_\_\_\_\_

Type of Event: ☐ Fundraiser ☐ Event ☐ Other

*If other, please describe:* \_\_\_\_\_

Date & Time of Event: \_\_\_\_\_

Location, if applicable: \_\_\_\_\_

Event Description: \_\_\_\_\_

Fundraising Goal: \_\_\_\_\_

Is Franciscan Children's the only beneficiary? ☐ YES ☐ NO

*If no, please list other charities/organizations:* \_\_\_\_\_

Will you be soliciting corporate donations for your event? ☐ YES ☐ NO

*If so, please provide a list of prospects. Please note: In order to avoid duplicate solicitations, please do not solicit any businesses or companies until you have received approval from Franciscan Children's staff.*

\_\_\_\_\_

\_\_\_\_\_

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*I have read and accept the terms and conditions found [HERE](#).*

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