

**FUNDRAISING EVENT APPLICATION**

**IMPORTANT:** This form must be completed in detail and filed with the NCCC at least forty-five (45) business days prior to the fundraising event. Read the important information below carefully.

First name		Last name	
Address			
City	State	Zip	
Phone		Email	
Event Name			
Event Description			
Event start date		Event end date	
Does this event benefit either a specific NCCC chapter (please list) or NCCC's general fund? Chapter (Name of Chapter: _____)      NCCC General Fund			

**Fundraising Goal:** We encourage you to collect donations from colleagues, friends and family. Set your fundraising goal here so that we can help you reach your goal.      \$ \_\_\_\_\_

**IMPORTANT INFORMATION – READ CAREFULLY**

Attach the following with the completed form:

- a. Copy of marketing materials that will be used to solicit the event
- b. List of any companies that may be involved in helping with event
- c. Projected costs to hold the event i.e. room rentals, postage, entertainment, food
- d. Licensing requirements for city or state if required
- e. Any contracts related to the event. Any and all contracts valued at \$500 or more to NCCC staff for review and approval at least 30 days prior to contract deadline.

**Any expenditures or financial obligations incurred either prior to approval of event or beyond approved activities/amounts shall be considered the responsibility of signatory/signatories.**

*I the undersigned agree to submit within 30 days after the completion of the fundraising event a completed Activity Results Report form itemizing all receipts and expenditures, and mail in the check for donation to the address listed below.*

1. Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_ Signature \_\_\_\_\_



<b>FOR INTERNAL USE</b>	
Reviewed by _____	_____
Date _____	_____
Approved by _____	_____
Date _____	_____