

# Gilda's Club Grand Rapids Community-Based Fundraising Interest Form



An Affiliate of the  
CANCER SUPPORT COMMUNITY

Thank you for your interest in supporting Gilda's Club Grand Rapids.  
A staff person will follow-up with you regarding your submission

\*\*\*If event details aren't finalized, please fill out to the best of your ability\*\*\*

Today's Date: \_\_\_\_\_

Date of Event: \_\_\_\_\_

## General Information

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

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

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

Have you previously raised funds or solicited goods for Gilda's Club Grand Rapids?

Yes No If yes, date: \_\_\_\_\_

## Event

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

Contact Person: \_\_\_\_\_

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

Location of Event: \_\_\_\_\_

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

Who is the target audience? \_\_\_\_\_

Number of people expected? \_\_\_\_\_

Projected donation from the event (please attach budget details): \$ \_\_\_\_\_

**Sponsors/Underwriters:** Many area businesses support the mission of Gilda's Club Grand Rapids, prior to soliciting area companies for gifts larger than \$500 please check with Gilda's Club Grand Rapids staff to coordinate the request.

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

Describe planned /publicity/promotional efforts: \_\_\_\_\_

Will any other charitable organization benefit from this event? \_\_\_\_\_

If so, please name and describe extent to which they will benefit: \_\_\_\_\_

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Assistance needed from Gilda's Club Grand Rapids (please check all that apply):

- Brochures and/or Program Calendars - If yes, quantity: \_\_\_\_\_
- Use of Logo
- Collection/Donation Envelopes
- GCCGR staff or representative (This will be depending on availability)
- Other, please explain: \_\_\_\_\_

Other Needs/Notes of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Once you have received approval from Gilda's Club Grand Rapids, please note that ALL printed materials must be submitted for pre-approval to ensure proper use of our name and logo. The final copy should also be submitted to us for our files. The full name, Gilda's Club Grand Rapids, must be used in all materials pertaining to the event. Event names may not incorporate the name Gilda's Club Grand Rapids as in "Gilda's Club Silent Auction" but may use a secondary line to identify the relationship such as "Silent Auction to benefit Gilda's Club Grand Rapids."

\_\_\_\_\_  
Print name of person applying to host event

\_\_\_\_\_  
Signature

**Please submit to:**  
**Sierra Belz, Development Coordinator**  
**Gilda's Club Grand Rapids**  
**Third Party Event Application**  
**1806 Bridge St NW**  
**Grand Rapids, MI 49504**  
**sbelz@gildasclubgr.org**  
**616.453.8300 x138**  
**269.716.3280 cell**