

INDEPENDENT FUNDRAISING EVENT REGISTRATION

Thank you for choosing to support the Cancer Resource Center of Western Maine. Because we want your efforts to be successful, it is important for us to be aware of INDEPENDENT FUNDRAISING EVENTS that are benefiting the Cancer Resource Center of Western Maine. We will support you in your promotion efforts through our website and social media, and can also provide helpful tips to maximize your fundraising efforts. Please do note that because of staffing limitations, we do not have the capacity to plan or organize your event. Thank you for your understanding.

Please review our INDEPENDENT FUNDRAISING Guidelines document prior to completing this registration form. Please submit this application at least 45 days in advance of your event or promotion.

YOUR NAME _____

EMAIL _____

PHONE _____

ADDRESS _____

INDEPENDENT FUNDRAISER Information

Name of the Individual/Team/Company/Organization hosting the event:

Event Name _____

Event Description (as you would like it to appear on the Cancer Resource Center website)

Event Location (address or website) _____

Event Start Date _____ Event End Date _____

Event Start Time _____ Event End Time _____

Will you be soliciting cash or in-kind donations from a business for the event?

YES NO If yes, please list items and donors

Proposed Budget

While we understand you may not know how much money your Community Fundraiser will raise, we include a proposed budget to help you plan for expenses pertaining to venue fees, promotion, materials, etc. We hope this will help you accurately plan and manage expectations for a successful event!

A. Total expected income (donations, ticket sales, etc.)

B. Expenses (costs such as advertising, rentals, food, etc.)

C. Anticipated net proceeds (A minus B = C)

D. Please indicate (in percentage or specific dollar amount) if only a portion of proceeds will be donated to the Cancer Community Center.

Waiver

I acknowledge, by signing my name below, that I have read and understand the Community Fundraising Guidelines. I also understand that the Cancer Resource Center of Western Maine and their affiliates take no responsibility for the activities conducted by a Community Fundraiser benefiting the Cancer Resource Center of Western Maine.

Signature _____

Thank you for ensuring no one is alone in their cancer journey. We wish you the best of luck in your efforts! As soon as we are able, we will contact you regarding your Independent Fundraiser Event registration.

Please return this completed registration form to:
Cancer Resource Center of Western Maine, PO Box 263, Norway ME 04268
Questions? Contact Mary Dempsey, Executive Director 207-890-0329