



Registration Form for Community Fundraising Events

Thank you for your interest in hosting a community fundraising event to benefit UConn through The University of Connecticut Foundation, Inc. We welcome your support! Please complete and mail, email or fax this form for approval at least 90 days prior to the event to April Brown, Director of Donor Events.

Phone: (860) 486-7169

Email: abrown@foundation.uconn.edu

1. Company/Organization Name and/or primary contact for the event

Name:

Address:

Contact:

Phone: Email:

Your organization is a: 501 (c) (3) Civic Group Community Volunteers
(Please check one.)

For Profit Other (describe)

2. What UConn program do you want your event to benefit?

3. Have you conducted this event, other fundraising events, to benefit UConn in the past?

Yes No

If yes, please provide details (date, name of event, program supported)

4. Event Name:

5. Event Description (include all details of how you plan raise money such as ticket sales, auction, door prizes, etc.):

6. Event Date: Rain Date:

7. Event Hours and Location:

8. Estimated Attendance:

9. Is the event open to the public? Yes No

10. Sponsors (if any):

11. Will you need the Foundation's assistance with any of the following?
 Logos/graphics Speakers/representatives

If checked, please explain:

The UConn Foundation must review all materials in which its name or logo appears. If you would like to use our logo, please request a file. The Foundation cannot guarantee that alumni, students, donors, volunteers, or employees of UConn or the Foundation will attend your event.

12. Additional Information (if known):

Admission Fee:	<input type="text"/>
Sponsorships:	<input type="text"/>
Other Revenue:	<input type="text"/>
Total Revenue:	<input type="text"/>
Estimated Event Expense:	<input type="text"/>
Estimated Donation:	<input type="text"/>

13. Are other charitable organizations benefiting from the event? Yes No

If yes, please list the names of these organizations and describe how they will benefit.

I have read and agree to abide by the Community Fundraising Events Guidelines as set forth by the UConn Foundation. Thank you for your support!

Signature:

Title: Date:

<p>For Office Use Only: <input type="checkbox"/>Approved <input type="checkbox"/>Declined</p> <p>Date Received: _____</p> <p>Date Applicant notified: _____</p> <p>Beneficiary Fund (Full name & fund number):</p> <p>_____</p> <p>_____</p> <p>Staff Signature: _____</p>
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