



Longmont Humane Society
Third-Party Fundraising Event Application

Third-Party Name: _____

Business (If Applicable): _____

Street Address: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Event Name: _____

Provide a brief description of the proposed event: _____

Event Date/Time: _____ Location: _____

List any potential sponsors or underwriters of the event: _____

Please list any other beneficiaries of the event: _____

Can you provide comprehensive general liability insurance if required? () yes () no

Describe how you plan to publicize and promote the event: _____

Request any resources or assistance from LHS below. This includes, but is not limited to, logos and staff/volunteer time:

LHS will be in contact regarding the availability of these resources upon approval. All resources are allocated on a case-by-case basis. Note that any additional resources requested at a later date or time will not be provided and changes to the event structure may require LHS withdraw from the event.

Projected Donation to LHS: _____

Specific \$ amount or % of proceeds must be provided

Please sign below that you have read and understand the Third-Party Fundraising Event Guidelines and Policies.

Signature

Date

Please return completed form to Claire McCormick at claire@longmonthumane.org.