

Third-Party Fundraising Event Application Form

Thank you for your interest in supporting Stand Up Placer through a third-party fundraising event. Please complete this application and submit it at least 60 days prior to your proposed event date. Approval by an authorized representative from Stand Up Placer is required before you begin fundraising activities.

Section 1: Applicant Information

- Name of Individual or Organization Hosting the Event:
- Primary Contact Person:
- Title/Role:
- Mailing Address:
- Phone Number:
- Email Address:
- Website or Social Media (if applicable):

Section 2: Event Details

- Name of Event:
- Type of Event (e.g., walkathon, gala, online campaign):
- Proposed Event Date(s):
- Event Location (physical or virtual):
- Expected Number of Attendees/Participants:
- Event Description:
(Please attach a brief summary of the event, its purpose, and activities involved.)

Section 3: Fundraising Information

- Estimated Total Revenue:
- Estimated Expenses:
- Estimated Net Proceeds:
- Percentage or Amount of Net Proceeds to be Donated to Stand Up Placer:
- How will funds be collected?
(e.g., ticket sales, donations, auctions, sponsorships)

Section 4: Marketing and Promotion

- How do you plan to promote the event?
- Will you use Stand Up Placer's name, logo, or branding in promotional materials?
 - Yes
 - No
- If yes, please describe how you plan to use our name/logo:
- Please attach samples or drafts of promotional materials, if available.

Section 5: Legal and Compliance

- Do you have insurance coverage for the event?
 - Yes
 - No
 - Not Applicable
- Please provide a copy of any permits or licenses obtained for the event.

Section 6: Additional Information

- Will volunteers or staff from Stand Up Placer be involved?
 - Yes
 - No
- If yes, please specify the type of involvement:
- Any other information you would like us to consider:

Section 7: Agreement, Disclosures and Signature

- I agree to provide the nonprofit with a full accounting of all funds raised and expenses incurred within 30 days of the fundraiser's conclusion.
- I agree that all promotional materials will be reviewed and approved by the nonprofit prior to distribution.
- I understand that all solicitations must clearly disclose the nonprofit's name, address, charitable purpose, and the percentage of funds that will benefit the nonprofit.
- I will not make any statements or representations that are false or misleading regarding the fundraiser or the nonprofit.

- I understand that if the fundraiser is conducted online or through a third-party platform, additional registration and reporting requirements may apply under California law (AB 488).

By submitting this application, I acknowledge that I have read and agree to comply with Stand Up Placer's Third-Party Fundraising Policy and the above disclosures. I understand that approval must be granted before any fundraising activities begin and that the use of Stand Up Placer's name, logo, or branding requires prior written permission.

- Name:
- Signature:
- Date:

**Please submit completed applications to:
Kelly Shea-Velasco
Chief Giving Officer, Stand Up Placer
PO Box 5462, Auburn CA 95604
kellyv@standupplacer.org
530-402-6018**