

Third Party Fundraiser Benefiting



Event Proposal

Guidelines

- A “Third-Party Event” (TPE) is one that is produced for the benefit of but independent of Desert AIDS Project. Monies raised from a TPE are donated to D.A.P. after the event.
- D.A.P. name and logo may be used as a means of promotion. However, D.A.P. requires prior approval on all materials displaying our name or logo.
- Normally, D.A.P. staff, volunteers or other agency resources are not used to produce the event.
- Due to internal fiscal controls, no expenses, losses, or reimbursements to the TPE organizer or any other fiduciary responsibility can be assumed by D.A.P.
- Once we receive the required information below, the Resource Development office will review and make a determination within 14 days.

Your Contact Information

Your Name:
Company Name:
Event Planner (if different):
Your Address:
City/State/Zip:
Telephone:
Fax:
Email:

Do you have a current relationship with Desert AIDS Project?

Please provide a brief description of the event; including date, venue and overall concept:

Date: _____ Time: _____ Admission/Ticket: \$ _____

Location: _____

Concept: _____

Do you or your event planners have any prior experience in producing an event of this type?

Do you have any committed underwriters or sponsors for this event?

How will Desert AIDS Project benefit from this proposed event?

Fundraising Goal \$ _____ Budgeted Expenses \$ _____ Net Proceeds \$ _____

Other Benefits: _____

Please detail what support you are requesting from Desert AIDS Project (rights to use our logo and/or name, marketing assistance, press release distribution, volunteers; printed materials, etc).

Do you have any existing relationships with the media regarding publicity and marketing for this event? Do you plan on inviting the media to your event?

Briefly describe your marketing / advertising plans.

Are there any deadlines Desert AIDS Project should be aware of?

Please use this space for additional comments or questions.

Once D.A.P. has received this information, the Resource Development office will review the proposal and make a determination within 14 days. Please mail to D.A.P. attn: RD Dept., 1695 N. Sunrise Way, P.S., CA. 92262, Fax: (760) 323-1299 or Email: jallen@desertaidsproject.org. Thank you for your interest in benefiting the services and programs of Desert AIDS Project.

FOR OFFICE USE: This event has been approved by Resource Development at Desert AIDS Project

(Two signatures required)

Fundraising and Special Events Manager

Date Approved

Marketing and Communications Director

Date Approved

Special Instructions / Notes

D.A.P. (logo and other required materials sent to event organizer on: ____ / ____ / 2010