**Fundraising Request form Attachment A**

Thank you for your interest in leading a fundraising event for the benefit of St. Paul’s Episcopal Church. All fundraising activities conducted by staff or parishioners on behalf of St. Paul’s must be approved by the Giving Board prior to advertising the event.

Here are the steps involved in the approval process:

* Contact the Giving Board via fundraising@stpaulscary.org as early as possible prior to the event for assignment of a liaison to facilitate your request.
* Carefully review St. Paul’s Policies for Fundraising (available via the website).
* Review other relevant policies and procedures (e.g., reserving childcare, serving alcohol, and advertising via St. Paul’s media).
* Identify and detail plans to allocate event proceeds
* Submit the following information to your liaison or to fundraising@stpaulscary.org

Name/type of event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General description of event (or attach description): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Event date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ministry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intended audience? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Open to public? (Y/N) \_\_\_\_\_

Estimated number of volunteers: \_\_\_\_\_\_ Estimated number of attendees: \_\_\_\_\_\_\_\_

Specific purpose for use of proceeds: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Publicity/Publication plan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**I have reviewed St. Paul’s Policies for Fundraising and accept their provisions**

Signature of event leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

------------------------- Items below to be completed by the Giving Board -----------------------------------------

Giving Board liaison: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fundraising request approval (for the Giving Board): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_