



Third Party Event Application

Thank you for considering Texas Health Resources Foundation to be the beneficiary of your philanthropic efforts and ideas! Please take a moment to review the *Guidelines for Conducting Fund Raising Special Events, Benefits, or Promotions to Support Texas Health Resources Foundation*. Please complete this form so that we may give your application the consideration it deserves. Please submit the following application for approval 90 days prior to conducting your event to benefit Texas Health Resources Foundation.

Mail application to:
Texas Health Resources Foundation
Attn. Susan Dalton
612 E. Lamar Blvd., Suite 300 Arlington,
TX 76011

Email application to:
SarahMLawsonPitler@texashealth.org

Step 1: Tell us about you and/or your organization

Today's date _____

Sponsoring organization/company/individual planning the event _____

Contact name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Website _____

Step 2: Tell us how money will be raised for Texas Health Resources Foundation

Name of philanthropic idea, event, program _____

Is there a specific Texas Health hospital or program you wish to benefit from the money raised? _____

How will the funds be raised? (Sales, pledges, etc.) _____

Date of fund raising activities _____

Location of fund raising activities _____

Duration of fundraising activities _____

Please list anticipated revenue and costs.

Total revenue expected \$ _____ Total expenses \$ _____

Net revenue to Texas Health Resources Foundation \$ _____

Step 3: Tell us about the proposed event/program elements and logistics

Describe how you plan to raise the funds _____

Do you or your organization have social media accounts (Facebook, Twitter, etc.?)

Yes No

If you answered "yes" to the previous question, what is the name of your social media accounts? _____

Will you or your organization promote the event on social media?

Yes No

How do you propose to use Texas Health Resource's name and/or logo? (i.e. solicitation letters, invitations, flyers, press releases, point of purchase materials, website, newsletter, other) _____

Will you provide general liability insurance for the event? _____

Have you ever coordinated or been involved in a project like this before? If so, please describe: _____

Texas Health Resources Foundation Information

- Texas Health Resources Foundation does not endorse products or services of any kind.
- Because of IRS regulations, Texas Health Resources Foundation is unable to assist with promotion or advertising of your company, event or product.
- Use of the Texas Health Resources Foundation logo requires approval.
- Third party event applications are reviewed by an internal committee. This committee will review your application within 14 days of receipt.
- If your proposal is approved by this committee a Texas Health Resources Foundation representative will contact you for more information.

Disclosure

For the protection of the consumer, the Better Business Bureau recommends that the anticipated amount or percentage of the proceeds from sales to benefit a charity be posted at the point of purchase (i.e. \$1 or 5% of each purchase or ticket benefits the named charity.)

Using the Texas Health Resources Foundation name or logo

Texas Health Resources Foundation's logo is trademarked, and any use without express written permission is illegal. Use this form to request permission.