



FUNDRAISING EVENT REQUEST FORM

YOUTH SERVICES

Please note that we do our best to accommodate all requests, but review each to determine if it is in line with our mission. We ask for **two weeks** for your proposal to be reviewed, and **two months'** notice be given prior to the event. We will contact you once a decision is reached!

Name of Organization/Individual Hosting Event: _____

Contact Person: _____

Email: _____ Phone: _____

Mailing Address (incl street, city, state, zip): _____

Event Date: _____ Event Time: _____

Event Name: _____

Event Location: _____

Description: _____

Fundraising goal (through admission tickets, raffle, auction, etc.): \$ _____

Ticket Price(s) and/or Sponsor Levels: _____

Have you held this event before? Y/N When/Where: _____ Proceeds: \$ _____

Organizations with whom you have contract/agreement in relation to this event (i.e. vendors, sponsors, etc.): _____

Will you be advertising/promoting this event? Please describe: _____

Are you requesting a Larkin Street staff member to attend and/or speak at your event? Please describe: _____

What materials or support do you need from Larkin Street in planning the event? _____

Any promotional materials which include the Larkin Street Youth Services' logo must be approved before use. Contributions are unrestricted unless otherwise stated.

Please use additional pages as necessary.

Return this completed form to: events@larkinstreetyouth.org

Thank you for your interest in Larkin Street!