

# **EPIC THIRD-PARTY FUNDRAISING EVENT REGISTRATION FORM**

*All fields required*

Thank you for your interest in hosting a third-party event on behalf of EPIC! We will respond to your request within two weeks of receipt of the completed form in good order. Please contact Carmen McCarthy at 309-689-3606 or [cmccarthy@epicpeoria.org](mailto:cmccarthy@epicpeoria.org) with any questions.

## ***BUSINESS, ORGANIZATION OR GROUP NAME:***

Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## ***EVENT DETAILS:***

Event Name: \_\_\_\_\_

Event Location (*if same address as above, please put "see above"*):

\_\_\_\_\_

Event Details:



## QUESTIONNAIRE:

1. Would you like to use EP!C's name and logo in your advertising? ☐ Yes ☐ No

*Note: EP!C's name and logo cannot be used without prior permission.*

2. Would you like to use any of EP!C's collateral?

*Note: If items are damaged and/or not returned by the agreed-upon date, you will be responsible for the repair/replacement.*

☐ Banner

☐ Table Banner

☐ any other collateral?

3. Would you like a representative from EP!C to come speak at the event?

☐ Yes ☐ No

4. Will you be contacting any outside vendors for donations for your event?

☐ Yes ☐ No

*\*Note: EP!C should be made aware of any solicitations to vendors to ensure there is no conflict with any of our existing initiatives. We appreciate your understanding!*

5. How will you deliver the donations? (All checks should be made payable to EP!C)

☐ Will mail a check to EP!C at 1913 W. Townline Road, Peoria, IL 61615

☐ Will deliver check to EP!C in person

☐ Arrange a check presentation at EP!C or at my organization (details will be worked out later)

*EP!C reserves the right to refuse any event request that does not align with our mission.*

