



**University of California, San Francisco
Office of University Development & Alumni Relations**

COMMUNITY FUNDRAISER APPLICATION

Thank you for your interest in organizing a fundraiser to benefit UCSF Benioff Children's Hospitals. UCSF policy requires that all fundraisers benefiting UCSF or the UCSF Foundation be officially sanctioned before the fundraiser begins. The following application is required for fundraiser approval. If you have any questions or need help with this application, please contact UDAR Special Events at 415-502-0382.

Please type or neatly print all information, then submit your application at least 90 days prior to your fundraiser:

UDAR Special Events, Attn: Meghan McMurray, Box 0248, San Francisco, CA 94143-0248;
OR Fax 415-476-4724; OR Email meghan.mcmurray@ucsf.edu.

I. EVENT DESCRIPTION

Event sponsor: Individual Business Organization/Group

Is this a 501(c)(3) organization? Yes No

Name of Sponsoring Entity: _____

Address: _____

Individual Responsible: _____ Phone: _____ Email: _____

For business/group: Number of years in existence: _____ Number of employees/members: _____

Previous relationship with UCSF: _____

Name of Event: _____

Date of Event: _____

Hours of Event: _____

Location of Event: _____

Description of Event (please explain in detail): _____

Has this event been done before? NO If yes, when? _____

(If yes, please attach additional information including publications, documentation demonstrating the outcome of the event, level of volunteer support, profitability, number of attendees, and total gift funds raised.)

Projected attendance: _____

Who is invited to this event? _____

List of businesses you intend to ask to sponsor this event: _____

Please attach a draft of the event invitation or solicitation and attach a draft of the donor receipt noting the fair market value of each event ticket.

II. BENEFICIARY INFORMATION

What UCSF department or program is the beneficiary of this event?

Describe how these funds will be used: _____

Will any other organization(s) benefit from this event? Yes No

If yes, please list other organizations and percentage to be donated to UCSF.

III. FINANCIAL INFORMATION

Projected expenses: _____ Projected gross income: _____ Projected net income: _____

% of net proceeds UCSF will receive: _____ Date to be given to UCSF: _____

How will funds be raised?

Ticket sales Admission Donations

Pledges Auction

Sales If yes, what type? _____

Other _____

Fair market value (non-deductible portion) of the ticket/admission price if applicable: _____

Please attach a proposed revenue and expense budget.

IV. LIABILITY and INSURANCE

Will liquor be served at this event? Yes No

If yes, please note who holds the liquor license, how served, controls in place, etc.

Please indicate the type of insurance in place:

Property General Liability Alcohol Liability

Other _____

Attach a copy of a valid Certificate of Insurance evidencing coverage. Please check with UCSF to determine whether we need to be listed as an additional insured.

Have you obtained the proper permits and licenses that pertain to your event? Please list the permits you have acquired and the permits you are still working on.

V. PUBLICITY INFORMATION

Prior to printing, publicizing, or distributing, UCSF must preview and approve all materials that include any UCSF-related logos and/or names. Please indicate the types of promotions you plan to do for your event and a general timeline for UCSF approvals:

Press releases (sending to: _____)

TV/Radio/Print ads (list stations/publications: _____)

Flyers (sending to: _____)

Save the Dates/Invitations: (quantity sending: _____)

Website/social media (include URL: _____)

Evites (sending to: _____)

Other: _____

How will any UCSF-related logos be used in your collateral? _____

Please list any additional information you would like us to know about your event.

I/we have read the UCSF Community Fundraiser Application and Community Fundraiser Guidelines in full, and I/we agree to adhere to these guidelines in planning and executing our fundraiser. I/we understand that the guidelines are not comprehensive and that all decisions for the fundraiser, including safety precautions, remain the responsibility of the sponsor. University of California, San Francisco and all its affiliates, including UCSF Medical Center, do not accept or assume any liability associated with this fundraiser.

Sponsor Signature

Date

UCSF Signature of Approval

Date