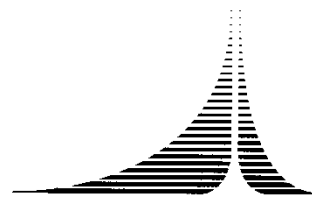


**Fundraising Event - Planning and Approval Form
The Unitarian Church in Westport**



BOTH SIDES OF THIS FORM MUST BE COMPLETED PRIOR TO SUBMISSION

In order to have a fundraiser that is successful along several dimensions, the following information needs to be thought through and put together in a plan. This form captures the key details of your plan. Please submit this form 45 days or more in advance of the proposed fundraiser dates to the church office (Scheduling & Office Manager) by email: diane@uuwestport.org

Contact Information for the Fundraising Planner(s):

Primary Contact Name: _____ Primary Contact Phone Number: _____

Primary Contact Email Address: _____

Secondary Contact Name: _____ Secondary Contact Phone Number: _____

Secondary Contact Email Address: _____

Church Group or Committee You Are Representing: _____

Information about the Fundraising Event or Campaign:

Event Name and/or Purpose: _____

Proposed Date(s): _____

Proposed Time(s): _____

Alternate date(s) or time(s) if proposed date(s) or time(s) are not available: _____

Description of the Event or campaign:

Proposed Location: _____

Projected Attendance: _____

Please indicate the beneficiary of the proceeds from this event:

General UUWestport

Lifespan Faith Development

Social Justice

Music

Outreach

Other Nonprofit (name and Tax EIN): _____

Financial Plan:

TOTAL GROSS PROCEEDS ANTICIPATED = \$ _____

Amount and description of expenses you see incurring for your fundraiser? (indicate \$ amount with description)

Timing and payment of any expenses (church office or reimbursement)? _____

Will the fundraiser involve the preparation and/or serving of **food or beverages**? _____ Yes _____ No

If yes, please provide details _____

Reminder: If food and/or beverages are being served, all clean-up is the responsibility of the planners and not of the church staff. Spaces must be left as they are found. Please also familiarize yourself with the Kitchen Protocol displayed in the kitchen or available from Diane by email.

How will the event be promoted? _____

Please include any promotion costs in the expense list above

Who will be responsible for handling, counting, and safeguarding the funds received during your event?*

Funds handler #1: _____ Phone: _____ Email: _____

Funds handler #2: _____ Phone: _____ Email: _____

*** Note: A minimum of two (2) fund handlers are required.**

Next are the approval steps (see below). The Scheduling & Office Manager will confirm space assignment with you, the fundraising planner, and review with you any additional event details. The Accountant or Treasurer will contact you to review handling of proceeds for the funds handlers and any payment system needs.

=====

Review and Approvals (section below for administrative use only):

=====

1. Scheduling & Office Mgr (calendar - initials & date): _____

2. Accountant (for under \$1,000) Treasurer for \$1,000 and over -review of financials, funds handling etc -(initials & date): _____

3. Senior Minister approval (signature & date): _____

If fundraiser seeks to raise an amount over \$1000 but less than \$10,000

4. YRSC approval (signature & date): _____

If fundraiser series seeks to raise an amount over \$10,000

4. YRSC approval (signature & date): _____

5. Board of Trustee Officer (signature & date): _____