

Fundraising/Awareness Special Event Application

Please return to NEA at least 30 days prior to event

CONTACT INFORMATION:

Name: _____

Group Affiliation (Support Group?): _____

Address: _____

Phone Number (h): _____ (w): _____

Email Address: _____

EVENT INFORMATION:

Event Title: _____

Event Description: _____

Event Date: _____ Event Time: _____

Event Location: _____

Insurance Coverage by Event Location: _____

Estimated Event Attendance: _____

SPONSOR INFORMATION (if applicable):

*if you have more than one, please list on a separate sheet of paper

Major Sponsor: _____

Sponsor Contact Information: _____

Average Estimated Donation: _____

Donation Mediums (circle all that apply):

Cash

Check

Visa/MC

In Kind (include value)

Please return completed form to NEA with Check-Off List

Attention: Joanne Langeraar

4460 Redwood Highway, Suite 16 D

San Rafael, CA 94903
