Winship Cancer Institute Event Application

1) Name of sponsoring organization: ______________________________________________________
   Contact name: ___________________________________ Contact job title: ______________________
   Address: __________________________________________ Email: ________________________________
   Primary phone: __________________ Alternate phone: _________________________________

2) Type of proposed project and detailed description (include time, date and location): __________________________

3) Is the project a public appeal for: (circle one):
   Funds ___________ Tickets ___________ Sale of commodities (specify): __________________________

4) Is your organization (circle one): Nonprofit ___________ For profit ________________________

5) Estimated donation: $_______________________________

6) What, if any, support (e.g., logo, balloons, banners) will be requested from Winship? __________________________

7) What is your plan for publicity, if any? ________________________________________________

   NOTE: All promotional materials using Winship’s name, logo, and organization information must be approved prior to distribution.

8) Have you sponsored a special project before? (circle one): Yes ___________ No ___________
   If yes, list the most recent project you have sponsored and its beneficiary. ____________________________
   Date of project: ___________________ Beneficiary contact name and number: _______________________

9) Is this, or will this be, an annual event benefiting Winship? (circle one): Yes ___________ No ___________ TBD

10) Why did you choose Winship to be the beneficiary of your event? ________________________________

11) I have read the Community Fundraising Events Guidelines and Policies and agree to follow them as stated.

   Signature: _______________________________ Print Name: _______________________________

FOR USE BY WINSHIP

☐ Approved ☐ Not Approved Signature: _______________________________ Date: _______________

Thank you for your interest in partnering with us to make a difference in the fight against cancer.

When you have completed this form, attach all supporting documents – such as budget, committee structure, information about your organization and printed materials, including brochures and drafts of invitations or tickets that will include the name Winship – and mail to:

Pam McAdams
pam.mcadams@emory.edu
Winship Cancer Institute of Emory University
1440 Clifton Rd NE, Suite 170 Atlanta, GA 30322