

EVENT INTEREST FORM

Thank you for your interest in raising funds for Mercy Foundation. Please take a few moments to complete this form and return it to the Foundation at 3400 Data Drive, Rancho Cordova, CA 95670. Prior to completing the form, you may find it helpful to read Mercy Foundation's Third Party Event Guidelines.

Contact Information

Name of Event Organizer:	
Individual Corporation	
Contact Name:	
Address:	City/State/Zip:
Contact Phone:	Email:
Event Information	
This is annual event	
Event Date:	Location:
Address of Event Location:	
Please briefly describe the event (includ	ling ticket price or entrance fees).
What ministry of Mercy Foundation w	ill be the beneficiary of your funds and why?

Please share the areas where you can use the assistance and expertise of the Mercy Foundation team.

Please share with us your proposed event budget:

(Proposed expenses should range between 28% - 35% of the proposed revenue raised. This ensures compliance with industry standards that reflect best practices for non-profits)

Projected Revenue	
Ticket Sales	
Sponsorships	
Other	
Total	
Expenses	
Advertising	
Food & Beverage	
Giveaways	
Mailing	
Printing	
Venue	
Other (please specify)	
Total	
Anticipated Contribution to Mercy Foundation	

I have read and agree to follow the event guidelines designated by Mercy Foundation

Event Lead Name (print)

Signature

Mercy Foundation's Director of Communications

Signature