



Fundraiser Agreement

Thank you for your interest organizing and hosting an event to raise funds for the American Cleft Palate-Craniofacial Association (ACPA)! We appreciate you supporting our mission to serve individuals and families affected by cleft lip/palate and other craniofacial conditions. Please note the guidelines below for all fundraising activities held by individuals or organizations other than ACPA and its staff:

- You are responsible for planning and carrying out your fundraiser. We are grateful that ACPA programs and services will directly benefit from your activities; however, ACPA cannot be an official sponsor or co-sponsor of your event or activity.
- You are permitted to use the ACPA name and logo according to our guidelines and subject to our prior consent. Any materials containing our name or logo that are intended for public distribution or display must be reviewed by ACPA a minimum of 30 days in advance. All uses of our name or logo shall inure to the benefit of ACPA. We may revoke our permission to use our name and logo at any time for any reason. If we do so, we will notify you in writing, at which time you agree to immediately cease use of our name and logo.
- Upon request, ACPA will provide a formal letter stating that you have agreed to sponsor activities that raise funds for our organization. You may share this letter with potential participants or sponsors.
- ACPA will provide donation acknowledgement letters for tax purposes only for donations made directly to us that we are able to verify. This may include an individual/organizational donation of overall event proceeds, individual check or cash donations with documented amounts and contact information for each donor, or other direct donations as determined in advance. In-kind donations, sales of individual tickets, entry fees, or other funds gathered to facilitate your event cannot be considered tax-exempt through ACPA.
- Upon request, ACPA may assist you in publicizing your event through social media or other public forums with mutual agreement and as staff resources allow.
- Upon request, ACPA may provide informational materials for distribution at your event as resources allow.
- You agree that appropriate releases have been obtained for any images shared with ACPA for the purposes of promoting and publicizing the event.

Please tell us more about your proposed fundraiser:

Type/Title of Fundraiser: _____
(e.g., 5k race, golf tournament, birthday party)

Location of Fundraiser: _____ Anticipated Date: _____

Event Fundraising Goal: _____ Attendance Goal: _____

Contact Person: _____

Organization/Company (if applicable): _____

Email Address: _____

Phone Number(s): _____

Mailing Address: _____

Any other information you would like to share:

On behalf of myself or my organization, I acknowledge and will adhere to ACPA's fundraising guidelines as listed on Page 1. I or my organization will hold the above described fundraising event in compliance with state and federal law and ethical standards. I understand that ACPA will not be liable for any act or omission related to my event, and I will secure waivers from participants which will include a waiver of claims or release of claims against ACPA arising from the fundraising event as appropriate.

Signature

Date

Printed Name and Title (if applicable)

Office Use Only:

- The American Cleft Palate-Craniofacial Association has reviewed this fundraising proposal and agrees to lend the organization's name as a beneficiary of this event according to the guidelines listed above.
- The American Cleft Palate-Craniofacial Association has reviewed this fundraising proposal and has decided to decline lending the organization's name as a beneficiary of this event according to the guidelines listed above.

Signature

Date

Printed Name and Title