

Third Party Event Proposal Form

Date: _____

Contact Information

Name of Organization (if applicable): _____

Contact Person: _____

Contact Address: _____

Contact Phone (Day): _____ (Evening): _____

Fax: _____ Email: _____

About Your Event

Name of Event/Project: _____

Description of Event/Project, including how funds will be raised:

Event/Project Date and Time: _____

Event/Project Location and Address: _____

Estimated attendance: _____

How will this event/project be publicized? _____

Have you formed a committee to help organize this event? Yes No

If yes, please describe:

Funding and Donation Information

Fundraising goal: \$_____ Projected expenses: \$_____

Estimated gift to Big Brothers Big Sisters of Metro Milwaukee: \$_____

Are there beneficiaries other than Big Brothers Big Sisters? Yes No

If yes, please list beneficiaries:

Do you plan to seek gifts/sponsorships from local businesses? Yes No

If yes, please list names and addresses of potential businesses:

PR Opportunities

Are there opportunities at your event for displaying Big Brothers Big Sisters materials? Yes No

If yes, please list opportunities:

Please complete the Third Party Event Proposal Form in its entirety, sign and date the Third Party Event Agreement and return to:

Nancy Bong
Special Events Coordinator
Big Brothers Big Sisters of Metro Milwaukee
788 N. Jefferson St., Ste 600
Milwaukee, WI 53202-3739
Fax: (414) 607-0135
www.bbbsmilwaukee.org

If you have any questions about the Third Party Event Agreement or the Third Party Event Proposal Form, please call Nancy at (414) 831-4580 or email at nbong@bbbsmilwaukee.org