



**Family Violence Prevention Services, Inc.
Battered Women and Children's Shelter**

7911 Broadway / San Antonio, Texas / 78209 / Phone. (210) 930-3669 x. 2217 / FAX (210) 821-6194

THIRD PARTY MONETARY FUNDRAISING FORM

This form serves as an agreement between the fundraiser and FVPS, The Battered Women and Children's Shelter for the purpose of setting forth the terms and conditions of our partnership in respect to the fundraising event described below. Please return to FVPS for approval.

Name: _____

Event Host: _____

Contact Name: _____

Contact Phone Number: _____ Contact Email: _____

Contact Address: _____

EVENT

Event Date: _____ Event Time: _____ Duration: _____

Web Address (if available) _____

Event Location and Street Address: _____

Event Description: _____

What is the goal for gross revenue? _____

What percentage will benefit FVPS? _____

Anticipated date of payment to FVPS? _____

What is the method of payment and delivery?

U.S. Mail _____ Administrative Offices _____

What type of assistance would you want from FVPS? _____

PUBLICITY

WE ENCOURAGE YOU TO TAG OR POST ON FACEBOOK USING PAGE NAME:

FVPS, THE BATTERED WOMEN AND CHILDREN'S SHELTER

PLEASE PROVIDE FVPS COPIES OF ALL MARKETING MATERIAL FOR APPROVAL

Please describe how this event will be publicized: _____

How do you plan on using the agency's image (name and logo)? _____

Will media be involved? _____

POTENTIAL SPONSORS AND UNDERWRITERS

List all companies you will approach and why: _____

I have read and will comply with third party event guidelines

Signature of event organizer

Date

Please return to:

Blanca Uribe, Director of External Affairs and Volunteer Relations

Phone: (210) 930-3669 Ext 2217

Email: Blanca.Uribe@fvps.org

<i>For FVPS Office Use Only</i>	
Approved by: _____	Date: _____
Remarks: 	