



BENEFIT APPROVAL FORM

Please complete and submit this form sixty (60) days before event to:

Allie Klein
Ronald McDonald House Charities Maryland
1 Aisquith Street
Baltimore, Maryland 21202
410.528.1010 x114
aklein@rmhcmaryland.org

Date of Application: _____

The Ronald McDonald House is accountable to the public for all fundraising activities using the House's name. For this reason, the following information must be provided to the Ronald McDonald House for review and approval before the sponsor proceeds with event plans.

Name of group/organization: _____

Are you a (an): employee group
 association/organization/club
 corporation
 other, please specify: _____

Please list two contacts from your group/organization that are coordinating the event or promotion:

1. _____	_____
Name	Daytime Phone #
_____	_____
Address	Cell Phone #
_____	_____
City/State/Zip	Email Address
2. _____	_____
Name	Daytime Phone #
_____	_____
Address	Cell Phone #
_____	_____
City/State/Zip	Email Address



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Brief description of proposed event, including location:

Date of Event: _____ Event Duration: _____

What businesses, individuals or foundations will be approached for underwriting, sponsorship, in-kind giving, or other contributions to help your event?

What incentives (if any) will _____ o these sponsors for their participation?

What promotional events are planned?

Admission charge: Yes No Amount \$ _____

Expected number of guests: _____

How and where will tickets be sold?



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Will the event be held at other organizations? Yes No

Names of other organizations:

Other way(s) in which funds will be raised:

Percentage of gross revenue to be donated to RMH: % _____

Expected donation to Ronald McDonald House \$ _____

RMH Representative for Check Presentation or Speaking Engagement?

Yes No

Press Attending? Yes No

Date of Presentation: _____

Number of Persons Expected: _____

Materials, if needed?

Other Details:



Ronald McDonald
House Charities®
Maryland

1 Aisquith Street • Baltimore MD 21202
410.528.1010 tel • 410.727.6177 fax • rmhcmaryland.org

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Within sixty (60) days of the completion of the scheduled event, all net proceeds will be delivered to:

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I have read the at _____ Approval Guidelines of Ronald McDonald House Charities Maryland and I agree to comply with all guidelines.

Signature of contact person

Thank you for supporting the Ronald McDonald House!

hope strength laughter courage