

Community Event Request Form

<u>Thank you</u> for your interest in hosting an event to benefit the Center for Grieving Children. The Center serves more than 4,000 grieving children, teens, families, and young adults annually through peer support, outreach, and education.

Please fill out the following form to the best of your ability and return to the Center for Grieving Children at 555 Forest Ave. Portland, ME 04101 or email it to us at emma@cgcmaine.org. A full review of your proposed event will be completed within 5 business days and a Center staff member will be in touch with you.

L. ORGANIZER'S NAME:	
2. ADDRESS:	
B. PHONE:	4. EMAIL:
S. EVENT NAME:	6. PROPOSED DATE:
7. Describe the event:	
3. Target Audience:	
9. Sponsors, if applicable:	
LO. Anticipated amount raised:	
1. When will funding be received:	
12. Has this event benefitted the Cer	nter or another charitable organization before? If So, which one?
13. Please describe any assistance yo	ou need from the Center: (this includes print material, volunteers, etc.):

THANK YOU!

Please review the Center's Community Event Guidelines. The Center reserves the right to opt out of any third-party event or fundraiser in the event a conflict arises interfering with our organizational goals. Third-party event organizers are prohibited from soliciting corporations, businesses, and foundations on behalf of the Center without the explicit permission and approval from the Center for Grieving Children.