



THIRD PARTY FUNDRAISING REQUEST APPROVAL FORM

Submit form or mail to: sbauer@rmhcarolinas.com | 706 Grove Road, Greenville SC 29605

Event Coordinator Name: _____ Request Date: _____

Sponsor Name (if applicable): _____

Coordinator Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Coordinator Phone Number: _____ Best form of communication: _____

This fundraiser is going to be done by an Individual Corporation Organization

Event Name: _____

Event Location: _____ Event Date(s): _____

Description of Event:

Have you or your party previously held an event for The Ronald McDonald House of The Carolinas? Yes No

Why did you choose The Ronald McDonald House?

Is this fundraiser in Honor or Memory of someone? Yes No

If yes, who: _____

Do you have any questions or concerns for us?

Tell us about your last fundraiser and who we can call to tell us more about the great work you did:

You will receive a response within 7-10 business days of submitting this form. If you have not received a response, please call (864) 235-0506 or e-mail Samantha Bauer at sbauer@rmhcarolinas.com