

# Independent Event Policy

Thank you for your interest in hosting an Independent Event to support The Association for Frontotemporal Degeneration (AFTD). Each year, we receive requests from individuals, groups, companies, and organizations who wish to host events to benefit AFTD's mission. We are extremely grateful for funds raised through these events. Proceeds help AFTD to support individuals and families struggling with FTD – and to bring forward a future free of this disease.

Because of the volume of the requests that we receive, we cannot personally participate in each event that is proposed. Therefore, we have developed criteria for participation. This policy applies to event hosts (fundraising volunteers) who wish to use AFTD's name and/or brand in promotion of their event.

AFTD is pleased to acknowledge and support Independent Events as part of our Grassroots Events Program. An AFTD Grassroots Event is defined as an event and/or fundraiser hosted by one or more AFTD volunteer(s) to raise funds in support of our mission. The individual, group, company or organization plans and puts on the event and incurs all expenses. All advertising for the event states what percentage or total of the proceeds will be donated to AFTD. All promotional materials must state that AFTD is the beneficiary of the agreed upon proceeds.

As a fundraising volunteer on behalf of AFTD's mission, we ask that you provide all elements needed to complete your event. **Before an individual, group, company or organization may proceed with an event to benefit AFTD's mission, the attached form must be completed and returned to the office for approval. You will be notified when your proposal is approved.** We enforce that these rules and regulations be followed, and that your signature on the proposal endorses your compliance:

## Rules and Regulations

- I. AFTD is not responsible for providing liability insurance for your event. The hosting individual, group, company or organization assumes full responsibility for the event. You agree to indemnify and hold harmless AFTD from liabilities, losses and expenses arising from your event.
- II. AFTD cannot sign or obtain a contract or permit for an Independent Event. Additionally, you may not sign or obtain a contract or permit on behalf of AFTD for your event. This includes all rules and regulations associated with Gaming.
- III. If AFTD's name and/or logo is intended to be used in promoting your event, AFTD must be notified in advance as being a beneficiary of the event and reserves the right to approve the details of that event prior to any publicity, and prior to any financial or legal obligations being undertaken. The details may include, but are not limited to, type of function, date, budget, ticket price, financial goals, intended audience, schedule, entertainment and sponsorships (both cash and in-kind goods and services). If income derived from the event is not sufficient to cover the expenses, the sponsoring company, individual, group or organization will be responsible for meeting the deficit.
- IV. The name and/or logo of AFTD may not be used, reproduced or distributed in any manner without the express permission of AFTD. All promotional material that includes the AFTD name and/or logo must be approved prior to use. The official logo will be made available upon approval of your proposal. Up to two weeks lead-time may be required for the release of AFTD's name and/or logo.

- V. An individual, group, company or organization may not offer, on behalf of AFTD, free tickets, advertising or mentions in event programs in exchange for cash donations, sponsorships or underwriting. Items sold at your event are not tax-deductible.
- VI. AFTD cannot guarantee media coverage (television, radio or print). You may contact the media about your event and communicate with AFTD contacts any arrangements that are made.
- VII. AFTD will, when able, help you promote your event through its website, social media pages and newsletters.
- VIII. AFTD is prohibited from purchasing any advertising, including that which promotes Grassroots Events.
- IX. AFTD cannot solicit donations (cash or in-kind), sponsorships, auction items, prizes or alcohol for your event. AFTD can provide you with a letter on our letterhead that states our recognition of your event in which proceeds will benefit our mission and you may use that to secure the previous items.
- X. You may not use or fill out a W9 with AFTD's information to solicit or secure. AFTD can provide you with a letter on our letterhead that states our recognition of your event in which proceeds will benefit our mission and you may use that to declare our 501(c)(3) status.
- XI. AFTD employees and volunteers may be available for consultation on planning and promoting your event. AFTD cannot guarantee employees and/or volunteers will be available physically for your event. However, if a request is made at least one month prior to the event, AFTD will attempt to provide a volunteer representative based on availability in the geographic area.
- XII. In order to be considered 100 percent tax-deductible, donations must be made directly to "The Association for Frontotemporal Degeneration" or "AFTD" by credit card or check. AFTD cannot receipt cash donations. If a check is made out to an event host, the host can endorse the back and write "for deposit by AFTD." If a lump net some is provided to AFTD, AFTD will write a receipt for that cumulative amount that may be copied and distributed. It is up to the donor to consult with their tax professional to determine to what extent their contribution is tax deductible.

**Proceeds from your event will benefit programs and services provided by AFTD. Thank you for role in helping to bring about an end to this disease!**



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# Independent Event Proposal

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_ Select one: Home Work Cell  
Email Address: \_\_\_\_\_ T-shirt Size: \_\_\_\_\_

## Please describe the event, sale or promotion in detail:

Name of Event: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Location: \_\_\_\_\_  
Description:

## Is your event open to the general public?

Events that are open to the general public will be posted on AFTD's website and social media pages, prior to the event date, to promote your event.

Yes No

If yes, please list the contact name and email address or phone number to be listed with your event:

## Please list all parties involved with the event (individuals, organizations, media, etc.):

## May we highlight your event in our communications (website, newsletter, social) post-event?

Yes No

## Do you require any materials?

Brochures:	Yes, I need _____ (quantity)	No
Wristbands:	Yes, I need _____ (quantity)	No
Pens:	Yes, I need _____ (quantity)	No
Lip Balm:	Yes, I need _____ (quantity)	No
Hand Sanitizer:	Yes, I need _____ (quantity)	No

**Please outline how you will promote the event (check all that apply):**

- |   |                  |
|---|------------------|
| Media                                       | Paid Advertising |
| Print                                       | Brochures/Flyers |
| TV  | Signs or Banners |
| Radio                                       | Direct Mail      |
| Social (Facebook, Twitter, Instagram, etc.) | Other:           |
| Public Relations (Agency or in-house)       |                  |

**Will AFTD's name and/or logo be used?**

Yes    No

If yes, how?

**What would AFTD's proposed responsibilities be?**

**Please include any other pertinent information:**

**I have read the above Independent event Policy and completed the Independent event Proposal, and understand/ agree to comply with the rules and regulations for conducting an Independent event in support of AFTD's mission.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Before an individual, group, company or organization may proceed with an Independent Event to benefit AFTD's mission, this form must be completed and returned to AFTD for approval. You will be notified when your proposal is approved.

**On behalf of AFTD, thank you for your generosity, kindness, goodwill, and your collaboration toward this mission.**

**FOR OFFICE USE ONLY**

**Accepted by AFTD representative:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date Received: \_\_\_\_\_

Approved    Yes    No    By: \_\_\_\_\_

Approval Date: \_\_\_\_\_

Notified By: \_\_\_\_\_

Notification Date: \_\_\_\_\_

Return this form to **AFTD's Events Department** at: [fundraising@theaftd.org](mailto:fundraising@theaftd.org)