

Today's	Date:	

Third-Party Event Proposal Form

Contact Name: Organization:			:
Street Address:		-	
City:		State:	Zip Code:
Phone:	Email:		
Name and/or type of fundraising event	or promotion:		
Event Date(s):		Event Time	:
Location:			
Event Goals (fundraising, outcome, etc., if ap	plicable):		
Please provide any additional details/in	formation abou	t this event:	
How much do you estimate will be cont	ributed to BRHS	i?:	
How many people do you expect to atte	end?		
What are your publicity plans? (Invitation	s, social media, pre	ess releases, adve	rtisements, flyers, etc)
What type of representation and/or ass	istance, if any, v	vould you requ	uest from BRHS?
Are there any other animal welfare orga	anizations or oth	ner organizatio	nal benefices of this event? If so,
please list:			
Please Submit To:			
Blue Ridge Humane Society			
Attn: Events 1214 Greenville Highway, Hendersonville	NC 28792		
	5, IVC 20732		
Email: <u>lrice@blueridgehumane.org</u>			
Thank you so much for supporting the B	lue Ridge Huma	ne Society and	d the homeless and needy
animals in our community!			
Office Use Only:			
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