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P.O. Box 426 • Clarence, NY 14031

www.buffaloniagarahonorflight.org
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FUNDRAISING APPLICATION FORM

The Buffalo Niagara Honor Flight (BNHF) is pleased to partner with organizations that wish to designate it as a beneficiary. In order to review your offer, we would like to find out a few details. Please complete the information below. Requests should be submitted at least **60 days** prior to your event/activity. If additional space is needed, attach a separate.

Date of Application: _____

Legal Name of Organization: _____

DBA if other than above: _____

Address: _____

City/State/Zip: _____

Email: _____ Website: _____

Date and time of event/activity: _____

Where will event/activity be held? _____

Event/activity description: _____

Is this a first time event/activity? ___ Yes ___ No

How to you plan to indicate BNHF as a beneficiary? _____

Please indicate the admission, participation or other cost to attendees (if applicable): _____

What involvement do you want from BNHF? (e.g. presentation, BNHF material, promotion, volunteers, etc.) _____

What is the anticipated dollar amount/percentage from the event/activity to be donated to BNHF? _____

How did you learn about BNHF? _____

Do you know anyone from BNHF? ___ Yes ___ No If yes, in what capacity? _____

Any information you think we should be aware of that will help us make a decision about partnering with your organization? _____

Contact Name _____ Email _____

Address _____

City/State/Zip: _____

Work Phone _____ Home/Cell Phone _____

TERMS OF AGREEMENT:

1. "Fundraiser" means the individual organization holding the activity/event in conjunction with or for Buffalo Niagara Honor Flight (BNHF)
2. This agreement acknowledges the applicant's event/activity responsibility/coordination to benefit the BNHF.
3. Fundraiser understands that BNHF is unable to assist in planning/executing marketing or publicity, soliciting prizes, or otherwise providing goods and services unless agreed to in writing with the applicant.
4. Fundraisers are only authorized to use BNHF logo or name its beneficiary charity after receiving their Authorization Letter/email. Fundraiser must provide an example of how BNHF logo or name is to be used on any support materials such as flyers, posters, etc. for approval prior to use.
5. Fundraiser must provide proof of insurance naming BNHF as an additional insured.
6. BNHF shall be held harmless and indemnify from any and all claims, lawsuits, demands, causes of action, liability, loss, damage and/or injury of any kind whatsoever in connection with Fundraiser's event. This applies and includes, without limitation, the payment of all penalties, fines, judgments, awards, decrees, attorneys' fees and related costs/expenses, and any reimbursements to BNHF for all fees, expenses and costs incurred by it.
7. The BNHF is part of a national program and as such is prohibited from telemarketing and door-to-door solicitation on its behalf.
8. All monies collected must be accurately recorded and documented in accordance with Charitable Fundraising Act (or equivalent). This enables BNHF to issue a receipt in the activity/event name.
9. BNHF is a registered 501(c) 3 organization. It will only issue individual receipts for tax deductions for attendee/supporters of activity/event if a general donation of \$100 or more is made. When attendee/supporter has given money in return for goods or services, a tax-deductible receipt can only be issued for the amount not covered by the goods or services. BNHF will only issue receipts after funds are deposited in BNHF account.
10. Funds received during a fundraiser/event using BNHF name must be received within 30 days from event conclusion.
11. BNHF reserves the right to withdraw its approval for the activity/event at any time if it appears that the Fundraiser is failing to adhere to any of the above terms.

Assistance Fundraiser can expect from BNHF:

- a. Use of BNHF name as its beneficiary charity.
- b. Use of BNHF logo and/or name for promotional purposes including printed material, social media and airwaves. Prior approval must be received for specific uses.
- c. BNHF brochures and other promotional materials including banner. Banners and any unused BNHF materials are to be returned to BNHF.
- d. Possible BNHF representation at event and/or promotional activities. Request should be submitted as far in advance as possible and is not guaranteed, as BNHF is a 100% volunteer organization with limited availability. Details of BNHF attendance at event should be included in request.

BNHF thanks you for your interest in fundraising on behalf of our veterans who will benefit from your generous support. If you have any concerns, questions or queries, please feel free to contact us at (716) 473-8465 or (716) 807-4346 or email info@buffaloniagarahonorflight.org.

By signing this agreement you agree to the terms and conditions:

Contact Person must be 18 years of age or older and represents and warrants that he/she is duly authorized by the participating organization to enter into this agreement on behalf of the Fundraiser. This is a binding contract. **Upon Board Approval the BNHF will send an Authorization Notice by email, which confirms and authorizes the activity/event.** If the fundraising event is denied, you will be notified by email.

Please send or email this form to:

Buffalo Niagara Honor Flight
PO Box 426
Clarence, NY 14031

info@buffaloniagarahonorflight.org.

Date _____
Organization Representative _____
Representative Title _____

OFFICE USE ONLY:

_____ Date BNHF acknowledges request
_____ Date BNHF Approves/Denies request
_____ Date Approved Application sent to Volunteer and Promotion Chairs
_____ Date Insurance received
_____ Date Feedback Requested