

Ronald McDonald House Charities of Southwest Florida

Proposed Event Form

(please print)



Event:

Brief Description of Event:

Event Website (if applicable): _____

First Time Event: Yes _____ No _____

Sponsor(s): _____

Contact Person: _____ **Title:** _____

Telephone Number: _____ **Fax:** _____ **Email:** _____

Date/Time of Event: _____

Location of Event: _____

Approx. Number of Attendees (if applicable): _____

Projected Dollars and/or In-Kind Goods to be Raised/Collected for RMHCSWFL:

We agree that all print/video/on-line materials will be presented to RMHCSWFL for approval before they are produced, printed or released: _____ **Agree**

Expectations of RMHCSWFL:

Submitted by: _____ **Date:** _____

Please return form to: Ronald McDonald House Charities® Southwest Florida, Inc.
16100 Roserush Court • Fort Myers, FL 33908
office: 239-437-0202 • fax: 239-437-3521
Email: laura@rmhcswfl.org