



Orange County Affiliate Special Events Agreement And Promotions Guidelines

Donations to the Orange County Affiliate of the Susan G. Komen for the Cure® are extremely important and your Komen interest is greatly appreciated. The Komen Orange County Affiliate is accountable to the public for fundraising activities using the Komen name. To this end, the following guidelines have been developed to serve as standards for those who organize special events, benefits or promotions on behalf of the Komen Orange County Affiliate ("Sponsor"). All questions regarding these guidelines should be directed to the Development office of the Komen Orange County Affiliate at (714) 957-9157.

After reviewing these guidelines, please complete and sign the attached agreement and return it to Susan G. Komen for the Cure, 3191-A Airport Loop Drive, Costa Mesa, CA 92626.

1. As a responsible steward of public funds, Komen believes that a reasonable percentage of the gross revenues from all fundraising events should be directed to the Komen Orange County Affiliate; exceptions may be made for first-year events and on a case-by-case basis. As a general rule, the Komen Orange County Affiliate holds to the standard set forth in the Better Business Bureau guidelines. Events held by or benefiting Komen Affiliates are required to keep expenses to 25% of gross revenue. ___ **Initials**
2. If Sponsor represents to the public that a percentage of proceeds will benefit the Komen, Orange County Affiliate, Sponsor should be prepared to provide access to an accounting of revenues and expenses. If so requested, an accounting and **fund distribution will be expected within 60 days after the conclusion of the special event or promotion.** ___ **Initials**
3. A Sponsor must request written permission to use Komen's name and/or logo. Completion of the Komen Orange County Affiliate Special Events and Promotions Application may constitute such a request. No use of Komen's name and/or logo will be allowed without a written agreement. ___ **Initials**
4. **All promotional material related to an event** benefiting the Komen Orange County Affiliate must be reviewed and approved by the Komen Orange County Affiliate prior to its production and distribution. ___ **Initials**

5. Sponsor agrees to inform the Komen Orange County Affiliate of any effort to recruit financial underwriters for any special event or promotion benefiting the Komen Orange County Affiliate. Informing the Komen Orange County Affiliate of all underwriting requests will ensure there is no duplication of underwriting efforts which may be currently underway. ___ **Initials**
6. The Komen Orange County Affiliate is **not responsible for ticket sales or other administrative aspects to the Sponsor's events**. Sponsor must have the means to sell tickets, send invitations, and/or publicize the event, if necessary. (Many organizations use volunteer committees to sell tickets and put on the event.) ___ **Initials**
7. Sponsor is responsible for obtaining any necessary permits and clearances required by the government and compliance with all applicable laws. Sponsor must also obtain appropriate insurance coverage as necessary. ___ **Initials**
8. Sponsor is responsible for complying with all IRS regulations regarding the event. IRS regulations governing charitable deductions for participation in special events are quite specific, and the Komen Orange County Affiliate can provide information and guidance on this matter. ___ **Initials**
9. The media rarely will provide "free time" for a charitable sales promotion. Sponsor should be prepared, therefore, to commit the necessary funds from advertising and promotion budgets. Sponsor should be prepared to initiate publicity for the event or promotion. ___ **Initials**
10. All references to the Komen Orange County Affiliate in publicity and promotional materials for the event or promotion should refer to the Komen Orange County Affiliate of Susan G. Komen for the Cure. ___ **Initials**
11. If donations are derived from sales promotions of a product, the product must be seen as non-controversial. For further clarification of "non-controversial" direct all questions to the Executive Director of the Orange County Affiliate. Events and promotions should provide favorable community image and be financially solvent. ___ **Initials**
12. The Komen Orange County Affiliate is available to discuss a gift restriction favored by the Sponsor to the event or promotion. However, the Komen Orange County Affiliate may reserve the right to use the funds generated as it sees fit without restriction by the Sponsor. ___ **Initials**



Orange County Affiliate Special Events Agreement and Promotions Application

Requesting Party (Name of Organization): _____

Contact Name: _____ Title: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____

Description of Activity or Fundraiser: _____

Location: _____ Date(s): _____

Purpose of Activity: _____

Will invitations/flyers be sent out? If yes, please describe: _____

Expected date of all promotional material related to an event to be approved: _____

Will pictures of the event be provided to Komen for the Cure? If yes, please describe:

What is the expected contribution to Orange County Affiliate of the Susan G. Komen for the Cure®? Please describe:

What is the expected date for fund distribution (ideally within 60 days after conclusion of the special event or promotion)? _____

Will you be using the Orange County Affiliate of the Susan G. Komen for the Cure® name in your advertising? If yes, please describe.

Will you be requesting a representative or speaker of Orange County Affiliate of the Susan G. Komen for the Cure® to attend the event? Will you be asking them to speak/present? If yes, please describe and provide a specific time and topic:

Will you be requesting materials?:

___ Breast Health Brochures

___ Signage

___ Bracelets

___ Pink Ribbons

___ Stickers

___ Other (Please describe)

Will you need volunteer(s) to attend your event? _____

If yes, please describe responsibility: _____

Date(s) & Time(s) Volunteers Are Needed: _____

Total number of Volunteer(s) Needed: _____

Skills Required: _____

Will a table be provided for volunteers? _____

Special Instructions or Requests: _____

Please note, pending job description and availability, we will make every effort to provide volunteers as requested. A minimum of 3 weeks of advance notice is requested. In addition, it is against Komen policy for volunteers to handle cash. Thank you!

Will there be any costs that Komen will incur? If yes, please describe:

Additional Comments/Requests: _____

Please note Agreement must be APPROVED by the Komen Orange County Affiliate. A signed copy of the agreement does not constitute approval until affiliate has signed and faxed back.

The Orange County Affiliate of Susan G. Komen for the Cure (“Komen”) is honored that _____ (“Sponsor”) has chosen Komen as the beneficiary of its _____ (“Event”) to support the fight against breast cancer. We are pleased that your organization shares our commitment to the advancement of breast cancer research, education, screening and treatment and we are proud to have the opportunity to partner with a company of your quality and stature.

The parties acknowledge and agree that, except as specifically provided herein to the contrary, the Sponsor will be solely responsible for all operational aspects of the Event including, but not limited to, the safe and lawful conduct of the Event and ensuring that the Event is conducted in a professional manner befitting the parties’ respective outstanding public images.

We trust that the foregoing accurately reflects our mutual intent and agreement with regard to the matters discussed herein. We would; therefore, respectfully request that you indicate your agreement by authorized signature on the line provided. We look forward to a successful and mutually prosperous relationship as we work together to eradicate breast cancer as a life-threatening disease. If you have any questions or comments, please do not hesitate to contact us.

**THE ORANGE COUNTY AFFILIATE OF
SUSAN G. KOMEN FOR THE CURE®**

By: _____
Lisa Wolter

Title: Executive Director

Date: _____

AGREED AND ACCEPTED:

By: _____
Sponsor Representative

Title: _____

Date: _____

<p>Office use only: Approved: _____ DEC: _____ Invitation/Flyer/Marketing approval: _____ Komen rep/Speaker requested: _____ Vol. or SB: _____ Breast Health Materials requested: _____ Quantity _____ Volunteer(s) requested: _____ Volunteer names: _____ Volunteer event contact: _____</p>
