



## LICADD Fundraiser Agreement

LICADD relies on community fundraisers and donations to sustain our life-saving services. Thank you for your interest in helping us to continue our work.

### Contact Information:

|                                 |                |             |
|---------------------------------|----------------|-------------|
| <b>Contact Name:</b>            |                |             |
| <b>Title:</b>                   |                |             |
| <b>Event Host/Sponsor Name:</b> |                |             |
| <b>Address:</b>                 |                |             |
| <b>City:</b>                    | <b>State:</b>  | <b>Zip:</b> |
| <b>Email:</b>                   |                |             |
| <b>Website:</b>                 |                |             |
| <b>Phone:</b>                   | <b>Mobile:</b> |             |

### Event Information:

|                                          |              |
|------------------------------------------|--------------|
| <b>Name of Fundraiser:</b>               | <b>Date:</b> |
| <b>Location:</b>                         |              |
| <b>Type of Fundraiser:</b>               |              |
| <b>List all activities planned:</b>      |              |
| <b>*Will you solicit sponsorships?</b>   |              |
| <b>Cost per Individual:</b>              |              |
| <b>Estimated Attendance:</b>             |              |
| <b>Estimated Gross Proceeds:</b>         |              |
| <b>Estimated Direct Costs:</b>           |              |
| <b>Estimated Net Proceeds to LICADD:</b> |              |

\_\_\_\_\_ (event host/sponsor) hereby requests the use of The Long Island Council on Alcoholism and Drug Dependence, Inc. (LICADD) name for an independent, third party sponsored fundraising event with the understanding that all of the proceeds will be donated to LICADD. LICADD is an organization described in Section 501(c) (3) of the Internal Revenue Code and is headquartered in Westbury, NY. LICADD grants the event host/sponsor the right to use LICADD's name for an independent, third party sponsored fundraising event with the understanding that all of the proceeds (after expenses) will be donated to LICADD. As this is an independent fundraiser the event host/sponsor agrees and understands that the planning, solicitation and implementation of the event are the sole responsibility of the event host/sponsor. The event host/sponsor will be liable for any expenses incurred from the event.

\*Please include all aspects of the event. Examples:

(#1) The golf tournament will be followed by a dinner. The cost of the dinner is \$35.

(#2) Live and silent auctions will be conducted at the Gala. Please provide details on separate sheet if needed.

**Acceptable Activities:** LICADD requires full disclosure about events that include the consumption of alcohol and/or games of chance.

**Liability Insurance:** LICADD shall be held harmless from any liability in connection with the fundraising event. If the host/event organizer's general liability insurance policy does not cover this event, liability insurance coverage must be purchased and proof of insurance submitted to LICADD.

**Disclosure:** The event host/sponsor agrees that it will disclose to contributors and other sponsors of the event that LICADD is an Organization described in Section 501(c) (3) of the Internal Revenue Code and those contributions, less the value of any benefits received in exchange for such contributions, are tax deductible to the extent allowed by the IRS Code.

**Management of event funds and reconciliation:** The event host/sponsor understands that for LICADD to issue receipts, all checks for sponsorships, fees, tickets, and donations etc. must be made payable to LICADD, and that checks to LICADD must not be deposited in the event host/sponsor accounts.

**Receipts:** The event host/sponsor understands, acknowledges, and agrees that receipts for tax-deductible donations as allowable by law are to be issued only by LICADD.

**Marketing:** The event host/sponsor agrees that all marketing materials used to promote the event using the LICADD name and/or logo will be submitted to and authorized by LICADD. The logo's appearance may not be altered.

Provide the Disclosure Statement for your event: \_\_\_\_\_

I understand and agree to these terms and accept responsibility for the conduct and timely reconciliation of this LICADD fundraiser.

Signature of Host/Event Organizer \_\_\_\_\_ Date \_\_\_\_\_

I authorize this fundraiser on behalf of LICADD.

|                     |      |
|---------------------|------|
| Signature of LICADD | Date |
|---------------------|------|

Email to [abrooks@licadd.org](mailto:abrooks@licadd.org) at 516-747-2606 x 105  
Or Fax: 516-747-0714