



# Local Program Fundraising Notice

Special Olympics Louisiana local programs that plan to conduct fund raising activities/events in the name of Special Olympics must complete this form **and receive written approval** if the expected gross is \$1,000 or more **OR** if there is any contract, waiver, or release form associated with the fund raiser. This form must be completed at least six weeks **prior** to the event or activity being held. If extensive preparations or initial costs are required, we encourage you to submit the form before any preparations or costs are incurred by the local program. Remember that all fund raising activities **must be approved in writing**.

**Please print/type the information below, attach a detailed budget or complete the budget worksheet and send form and all attachments to SOLA.**

Local Program: \_\_\_\_\_ Coordinator: \_\_\_\_\_

Name of event/project: \_\_\_\_\_

Who is hosting this event? Local Program \_\_\_\_\_ Other organization \_\_\_\_\_  
(if other organization, please provide name of organization): \_\_\_\_\_

Event/project organizer: \_\_\_\_\_

Organizer's Daytime phone: \_\_\_\_\_ Event/Project Date(s) \_\_\_\_\_

General description of project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will the Special Olympics name or logo be used in any promotional material? Yes or No \_\_\_\_\_  
(If yes, please attach a draft of **all** promotional material that may be used)

Are there any contracts, waivers, liability release forms, or rental agreements associated with this project/event? Yes or No \_\_\_\_\_ (If yes, please attach copies of **all** associated forms)

Does this project adhere to all SOI/SOLA policies and procedures? Yes or No \_\_\_\_\_

Are the funds being collected by an outside organization? Yes or No: \_\_\_\_\_ If yes, how will the funds be accounted for and distributed? \_\_\_\_\_

\_\_\_\_\_

**Signatures:**

\_\_\_\_\_  
Local Coordinator/Phone Number      Date

\_\_\_\_\_  
Project Coordinator/Phone Number      Date

For Office Review Only:    DEV \_\_\_\_\_      CEO \_\_\_\_\_

# Local Fundraising Budget Worksheet

These are examples of typical expenses and income from fundraising activities.  
 If your project/event does not have a certain expense or income listed, simply leave that space blank. If you already have a detailed budget, you can attach that to the notification form instead of completing this worksheet.  
 If you need assistance, please contact your area director.

Local Program: \_\_\_\_\_

Project/Event Name: \_\_\_\_\_

**Expenses:**

Facility Rental	
Equipment	
Food/Refreshments	
T-Shirts	
Decorations	
Office Supplies	
Equipment	
Entertainment	
Security/Medical	
Banners/Signage	
Awards/Recognition	
Postage	
Printing (flyers/letters/posters)	
Other _____	
Other _____	
Other _____	
Other _____	
<b>Total Estimated Expenses:</b>	

\* Attach additional sheets if necessary

**Income:**

Admission/Registration Fees	
Food Sales	
Souvenirs	
General Donations	
Sponsors (please list)	
Sponsor:	
Sponsor:	
Sponsor:	
Sponsor:	
Sponsor:	
Sponsor:	
Sponsor:	
Other Income:	
Other Income:	
Other Income:	
Other Income:	
<b>Total Estimated Income:</b>	

\* Attach additional sheets if necessary

Total Estimated Income: \_\_\_\_\_

Total Estimated Expenses: \_\_\_\_\_  
 (expenses should not be more than 25% of the estimated income)

Estimated Net Income: \_\_\_\_\_