

Grandmothers Event Registration Form



Fundraising Information	Group Contact Information
Event Name:	Group Name: Group ID#:
Event Date & Time:	Mailing Address: City/Town: Prov./Terr.: Postal Code:
Event Contact Person:	Email (event contact):
Signature (if possible): x _____	Phone (event contact):

What type of event are you organizing? *(Please check all that apply)*

- Dinner/Brunch/Luncheon/Tea Speaking Event Scrabble
 Pledge Event (e.g., Stride walk) Concert/Film Screening Dare/Dare to Dine
 Sale: _____ Other: _____

How will you be raising funds? *(Please check all that apply)*

- Ticket Sales Sales Donations/Collection
 Pledges Auction Other: _____

Would you like SLF to post your event on our website? No Yes

Do you require materials from SLF? No Yes

Will you be creating your own promotional materials? No Yes *(Please send for review)*

Event Description

This form is also available online at www.stephenlewisfoundation.org/grandmothers-resources