Event Request Form

Submit via email: kgerossie@nh-cc.org, fax: 603-669-0270, or mail: 100 William Loeb Dr. Unit 3, Manchester, NH 03109.

Event name: ___________________________________________________________

Start date: ___________________________ End date: ___________________________

Start time: ___________________________ End time: ___________________________

Name of contact person for event: _______________________________________

Business name: _______________________________________________________

Phone number: ___________________________ E-mail address: ___________________

Mailing address: _______________________________________________________

Description of event: ___________________________________________________

Event location: _______________________________________________________

This event will collect: □ Goods □ Monetary donations □ Both

Event Website (if applicable): ____________________________________________

Does this event benefit or involve any other organizations? □ Yes □ No

If yes, please describe: ________________________________________________

Is this event open to the public? □ Yes □ No

Requests for support from CCNH (check all that apply, all requests are pending availability and approval)

□ Event listing on the CCNH website

□ CCNH promotional materials (examples: newsletters, latest direct mail piece, brochures, social media)

Opportunity for a CCNH info table? □ Yes □ No

Opportunity for CCNH staff/volunteer to speak? □ Yes □ No

What is your promotion plan for this event? Please attach all press releases, ads, or copy for PSAs that you plan to use to promote this event (future materials can be sent at a later date after they are approved by our Director): ___________________________________________

By submitting this form, you are acknowledging that mention of Catholic Charities New Hampshire as a beneficiary, use of the Catholic Charities New Hampshire logo, and use of information from cc-nh.org must be approved before use.

Person completing this form: _____________________________________________

Position or title: _______________________________________________________

Submit this form via email: kgerossie@nh-cc.org, fax: 603-669-0270, or mail: 100 William Loeb Dr. Unit 3, Manchester, NH 03109.

For office use only: Date received: ___________________________ Approved: ___________________________

Comments: ____________________________________________________________________________________________

______________________________________________________________________________________