

Nemours® Fund for Children's Health



Nemours Fund for Children's Health

To donate to Nemours/Alfred I. duPont Hospital for Children or other Delaware Valley Locations, please contact:

*Shands House
1600 Rockland Road
Wilmington, DE 19803
Phone 302-651-4828
Fax 302-651-4487*

To donate to Nemours Children's Hospital, please contact:

*9145 Narcoossee Road
Orlando, FL 32827
Phone 407-650-7990
Fax 407-694-1355*

To donate to Nemours Children's Clinic locations in Jacksonville or Pensacola, please contact:

*10140 Centurion Parkway North
Jacksonville, FL 32256
Phone 904-697-4103
Fax 904-697-4171*

Thank you for your interest in supporting Nemours!

Getting started is easy! The Nemours Fund for Children's Health is here to help you brainstorm ideas and guide you in the decision making for your own personalized fundraiser. The possibilities are endless. Here are a few ideas:

- Bake sale
- Coin drive
- Garage sale
- Golf outing
- Holiday-themed party
- Luncheon
- Restaurant or retail promotion
- School or church fundraiser
- Walk-a-thon, dance-a-thon, etc.
- Raffle
- Ice cream social
- Car wash
- Soccer, volleyball, basketball tournament
- Bowling tournament
- Jeans day/jersey day

Please submit the Third Party Event Proposal for approval prior to planning an event.

How we help make your event a success

- Offer advice and expertise on event planning and fundraising
- Acknowledge direct contributions to Nemours
- Provide and approve use of our logo, as appropriate
- Assist in directing contributions towards areas of special interest or areas of need within Nemours
- Provide letter of authorization to be used to validate the authenticity of the event and its organizers
- Coordinate check presentations, if appropriate

Services we are unable to provide

- Nemours tax exemption number or certificate
- Insurance or liability coverage
- Funding or reimbursement for your expenses
- Mailing list of donors and/or vendors
- Nemours letterhead
- Celebrities or professional athletes for your event
- Publicity (newspaper, radio, television, etc.)
- Guaranteed attendance of Nemours Staff
- Nemours-branded giveaway items
- Nemours posters or banners

Third Party Event Proposal

The Nemours Fund for Children's Health

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Nemours has built a strong, positive reputation both locally and nationally over the past 70 years. As a third party fundraiser, we ask that you be respectful of our mission and reputation and that you adhere to the following guidelines when planning your fundraiser:

1. Third Party events should complement the mission and image of Nemours. All potential event coordinators must complete and submit in advance the Third Party event proposal to Nemours Fund for Children's Health.
2. The organization and execution of the event is the responsibility of the event coordinator. The event coordinator must obtain any necessary permits, licenses, or insurance.
3. All event-related publicity in which Nemours name and/or logo are used (print, broadcast and online) must be in accordance with the established brand identity guidelines and approved by Nemours Fund for Children's Health before distribution to the public. For legal reasons, Nemours may only be identified as the beneficiary of the event. For example, you cannot be called "Nemours Golf Outing." Rather, the fundraiser should be promoted as "Golf Outing to Benefit Nemours."
4. The public should be informed regarding any net amounts that will be donated to Nemours. If Nemours is not receiving all of the event proceeds, then the exact percentage that benefits Nemours must be stated clearly on event materials.
5. All prospects, including corporations, solicited for gifts must be approved by Nemours Fund for Children's Health.
6. All checks from event proceeds must be made out to Nemours. Checks made payable to us must be processed by our staff and not by any external banks or financial institutions.
7. Event proceeds must be submitted to Nemours Fund for Children's Health within 30 days from date of the event.
8. Event coordinators are allowed to use the Nemours logo prior to and 30 days after the event. After 30 days, the logo must be removed from all materials (e.g. websites)

Third Party Event Proposal

Send completed proposal form to your local Nemours Fund for Children's Health

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Today's Date: _____

Name of Organization: _____

Contact Person: _____

Contact Address: _____

Home Phone: _____

Work/Cell Phone: _____

Email: _____

Name and description of event/project (*attach additional sheets if needed*): _____

Event/project location and address: _____

Event/project date and time: _____

Cost per person: _____

How will this event/project be promoted: _____

Are there beneficiaries other than Nemours: Yes No

If so, who: _____

Estimated revenue: _____ Estimated donation to Nemours: _____

Estimated date funds will be donated: _____

Do you plan to seek sponsorship from local corporations: Yes No

If yes, please list names of potential corporations: _____

Who will be asked to attend/support this event: _____

What do you need from Nemours: Logo Event Consultation Information on Nemours

Other _____

I acknowledge and agree that:

- All events to benefit Nemours must be approved prior to the event or its publicizing.
- All promotional materials for proposed events that include Nemours' name or logo must be approved before they are released.
- Event proceeds will be submitted within 30 days of the event date.
- After 30 days from the date of the event, I will remove the Nemours logo from all event materials (e.g. website)
- Nemours' auditors may request verification of revenue from events being run on its behalf.
- Nemours shall incur no costs or liability associated with this event.
- I must provide staffing and volunteers for this event.
- I must use my own mailing list for this event.
- I must comply with all requirements of the IRS in respect to the provision of donation receipts related to this event.
- Nemours reserves at any time the right to withdraw the use of its name and logo.

Name of Event Coordinator (Printed): _____

Signature: _____ Date: _____

Approved by Nemours Staff: _____ Date: _____