

## **InStride Therapy – Third Party Events Application**

### THIRD PARTY EVENT POLICY

InStride Therapy, Inc. defines a “Third Party Event” as any fundraising activity by a non-affiliated group or individual, in which InStride has no fiduciary responsibilities and little or no staff involvement.

Such events include:

1. Non-Affiliated Event - This type of event connects InStride with an existing event, activity or program, and a portion or all of the proceeds are donated to InStride.
2. Special Interest Event - This is the organization of a new and independent event specifically designed to raise funds for InStride with all net proceeds going to benefit InStride.

InStride is extremely grateful to the many individuals and groups who wish to organize events to support its mission. However, only those “Third Party Events” that meet specific criteria, and legitimately and genuinely benefit InStride, will be considered for endorsement. Each event will be reviewed on a case-by-case basis.

### THIRD PARTY EVENT POLICY GUIDELINES

The following are the approved guidelines for “Third Party Events.” Guidelines must be agreed upon by both the outside party and InStride. An event application must be submitted for review and approved before initiation of the event takes place. Approval will be granted from the \_\_\_\_\_ . Please complete and submit the signed policy and application form.

### PROMOTION

The event will be promoted and conducted in a manner to avoid statement or appearance of InStride endorsing any product, firm, organization, individual or service.

InStride reserves the right to decline any underwriting and/or sponsorship when it believes that the association may have a negative effect on the credibility of InStride.

All “Third Party Events” should establish a timetable and an action plan at least three months before the event. An INSTRIDE staff person should be contacted to aid in the development of committee structure, marketing and deadlines, if applicable.

All branding must comply with InStride requirements. The official logo of InStride should be appropriately used in conjunction with such an event, but may not be altered in typeface, color, configuration and/or position. Any use of the InStride logo must adhere to established graphic standards.

InStride must review and approve all promotional materials including, but not limited to, advertising, letters, brochures, flyers and press releases prior to production or distribution. Promotional materials and/or advertisements cannot be purchased with InStride funds. Any such advertisement should be the result of underwriting or sponsorship related to the event.

InStride reserves the right to participate in similar promotions and other “Third Party Events.”

InStride reserves the right to decline endorsement of an event if other non-profit organizations are beneficiaries and/or involved in the event without mutual compliance.

### LIABILITY

InStride is not financially liable for the promotion and/or staging of a “Third Party Event.” “Third Party Event” organizers will have participants complete a waiver for release from liability when requested by InStride. “Third Party Events” organizers will provide insurance certificates.

### REVENUE GENERATION

100% net (minus campaign expenses) income from the Third Party Event must be remitted to InStride. Groups cannot receive or retain fundraising income.

All promotional materials must clearly state that 100% of proceeds and/or the portion of the ticket price will benefit InStride.

InStride must receive all net proceeds within 30 working days of the conclusion of the event and/or promotion.

InStride cannot endorse or be affiliated with any events that are for the benefit of a specific person or InStride member.

### RECORDS

InStride must receive a list of targeted sponsors for the event, *before they are approached*, to minimize overlap with other fundraising campaigns underway by InStride.

InStride must receive a complete accounting of all funds collected and expenses related to the event.

InStride reserves the right to inspect all event financial records.

InStride will receive a list of all tangible non-cash contributions to the events. INSTRIDE will receive a list of all donors (including addresses) who contributed to the event.

“Third Party Event” organizers will collect names of participants, sponsors and volunteers, mailing appropriate materials as needed. Organizers may coordinate with InStride for assistance.

ACCESSIBILITY

All “Third Party Events” should be accessible to people with disabilities. The event should take place at a location that meets ADA regulations. “Third Party Event” organizers should promote and make arrangements for any special accommodation needs by participants, volunteers, and/or staff.

TAX ISSUES

According to Section 170 of the Internal Revenue Code, the general rule is: *“There shall be allowed as a deduction any charitable contribution (as defined in subsection (c)) payment of which is made within the taxable year.”* Subsection (c) goes on to define the term “charitable contribution” as meaning a gift to or for the use of qualified organizations. To become a qualified organization, most organizations must apply to, and be approved by, the IRS. If a payment is made to an organization that is a qualified organization, the payment is a charitable contribution.

ORGANIZATIONAL ISSUES

InStride is approved by the IRS as a charitable (qualified) organization as defined by Internal Revenue Code Section 501 (c)(3) meaning that contributions to InStride qualify for the maximum charitable contribution deduction under the Internal Revenue Code.

PRACTICAL ISSUES

A difficulty arises when an independent, outside organization wishes to raise money for InStride. If the payments are made to this independent organization and it is not a qualified organization, tax deduction rules do not apply; if payments are payable to InStride, then they qualify to the extent allowed by law.

After you have read the above policy thoroughly, please fill out the “Third Party Event” Application and sign and date this agreement below. Mark any mutually agreed upon changes to the above with initials.

**THE ABOVE GUIDELINES HAVE BEEN READ AND AGREED TO BY:**

Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Organization/Affiliation: \_\_\_\_\_  
InStride Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Please send completed application and signed agreement to InStride Therapy, Box 365, Nokomis, FL 34274. Phone: 941-412-9333 (4673) Fax: 941-483-3653

## Third Party Event Application

Today's Date: \_\_\_\_\_

Please fill out and fax to the attention of \_\_\_\_\_ or email to \_\_\_\_\_.

Name of Group/Organization planning event

Name of individual(s) in charge of event

Mailing Address

Email Address

Daytime Phone Number

\_\_\_\_\_  
Name of Event

\_\_\_\_\_  
Date and Time of Event

Location of event

Event is:  Open to public  Invitation only

Ticket Price: \$ \_\_\_\_\_ Table Price: \$ \_\_\_\_\_

\_\_\_\_\_  
Has this event taken place before:  Yes  No

If so, when? Date: \_\_\_\_\_

\_\_\_\_\_  
Will the amount raised be matched?  Yes  No

Briefly describe the event and the fundraising components (ticket sales, table sales, raffle, auction, sponsors, etc.)

(Please use the back of this

form if you require additional space.)

If possible, would you like to have someone from InStride Therapy?  Yes  No If yes, what role will they play?

**Press Information**

How will the event be publicized? (press releases, advertisements, PSAs, promotional flyers, etc. Please attach any samples to the application.)

Do you plan to use the InStride logo in any of your promotional materials?  Yes  No If yes, What address can we e-mail it to?

Will you need InStride Collateral?  
(Please note the amount of the following items.)

**ITEM QUANTITY**

Overview Brochures \_\_\_\_\_  
\_\_\_\_\_

InStride Banner (on loan)

**Budget/Fundraising Information**

Total projected revenue \$ \_\_\_\_\_  
\$ \_\_\_\_\_

Total projected expense

Will the event be sponsored or underwritten by another organization?  Yes  No If yes, please specify organization: \_\_\_\_\_

**\*REQUIRED: Please list all businesses you will be soliciting for sponsorship or in-kind contributions. (Use back of form if necessary.)**

Will all net proceeds go to InStride or will proceeds be divided among other charitable causes?  
 Yes  No If no, list additional beneficiaries: \_\_\_\_\_