**2014 Downtown After 5 Nonprofit Selection Form – Wristband Sales**

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| **Name of Nonprofit:**  |  |
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| **Sponsoring ADA Board Member:** |  |
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| **Mailing Address:**  |  |
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|  |  |
| **Primary Contact:**  |  |
| **Phone Number:**  |  |
| **Email Address:**  |  |
|  |
| **501 c (3)?**  | **[ ]  YES** [ ] **NO** |
| **ADA Member:**  | **[ ]  YES** [ ] **NO** |
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| **Charitable purpose or use of proceeds:**  |  |
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| **The group’s connection to Downtown Asheville:**  |  |
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| **Preferred Date (mark 1st and 2nd choice):**  |
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| **\_\_\_\_\_May 16** \_\_\_\_\_**June 20** \_\_\_\_\_J**uly** **18 \_\_\_\_\_\_August 15** \_\_\_\_\_\_**September 19** |
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| **If selected, your group agrees to the following terms:**  |
| * **You will have at least 26 individuals, over 18, available to work in two shifts (16 – 1st shift, 10 – 2nd shift). These shifts run from 4:45-7:00 and 7:00-9:15.**
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| * **Failure to provide the minimum number of volunteers per shift will result in your organization forfeiting 25% of your proceeds and may result in your organization becoming ineligible for future event considerations.**
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| * **The individuals volunteering agree to abide by the ADA rules for wristband sales.**
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| * **Your group will split the wristband revenues with the ADA (50/50) up to a maximum of $2,000.**
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| **Primary Contact’s Signature:**  |  |
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***The deadline for the application is February 7th.***

***The charities will be selected on February 12.***