



Worcester Service Center:
81 Gold Star Boulevard, Worcester, MA 01606-2813
Fax 508-852-7674

Holyoke Service Center:
301 Kelly Way, Holyoke, MA 01040-9683
Fax 413-536-1383

Adult Fundraising Proposal

Fundraising activities are conducted by adults, for adults, to benefit a service unit or the council as a whole. The proposed fundraising activity outlined below must be in keeping with the principles for which the organization stands. Please send this completed form to the Worcester Service Center (or drop off at any of our council service centers) at least three weeks prior to your proposed activity. **The form must be filled out completely in order to be considered.** *To submit this form electronically, save the file to your computer then attach in an e-mail to msherry@gscwm.org*

Name: _____ Home Phone: _____
E-Mail: _____ Additional Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

Name of Fundraising Activity: _____

Description of the Activity: _____

Where/to whom will the proceeds of your activity be directed: _____

If Hosting an Event

Will girls be in attendance? Yes _____ No _____

Note: Girls may not take on any fundraising responsibility at adult fundraising events (i.e. they may not sell raffle tickets or oversee a silent auction)

How will the event generate funds? (Select all that apply)

- Admission Fee Anticipated Donations Silent Auction
 Raffle Other (explain: _____)

How do you plan to promote your event?

I have attached all promotional materials to my proposal for council approval. *Note: The Girl Scout name and logo may not be used without council approval.*

If Engaging in Direct Solicitation of In-Kind Donations

Who will you be soliciting and for what?

Please attach a separate list with names, address and solicitation amounts, if necessary)

Note: GSCWM reserves the right to remove businesses/individuals from solicitation lists to avoid overlap of fundraising efforts.

I certify that the proposed fundraising methods outlined above are in keeping with the principles for which Girl Scouts of Central and Western Massachusetts and GSUSA stand, and that I have provided council with all details of my fundraising activity.

Signature of Adult Representative: _____ Date: _____

Signature of Fund Development Staff (indicating approval): _____ Date: _____