



THIRD PARTY EVENT FORM

CONTACT/HOST INFORMATION

Name of organization (if applicable): _____

Contact Name: _____ Phone Number: _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____

EVENT INFORMATION

Name of Event: _____ Event Date/Time: _____

Event Address: _____ City: _____ State: _____ Zip: _____

Event Website (if applicable): _____ Event Description: _____

Is the event open to the public? Yes No Is this event : Annual One-time

Is there a cost for participants? Yes No If yes, how much? _____ Estimated Attendance: # _____

Anticipated event income: \$ _____ or _____ % of funds raised

How is the event being promoted? _____

Please describe any promotional materials where you would like to include Hubbard House's name or logo (*approval required prior to publication/printing of materials with our name or logo*):

THIRD PARTY GUIDELINE AGREEMENT

By signing below, the host understands and agrees to the Hubbard House Third Party Event Guidelines.

Name: _____ Date: _____

Signature: _____

Submit completed form to Tammy Huckfeldt by:

E-mail: Thuckfeldt@hubbardhouse.org, Fax: (904) 354-1342, or Mail: PO Box 4909, Jacksonville, FL 32201

For more information please call (904) 354-0076 ext. 281

(Hubbard House Use Only) Approved event: Yes No Signature: _____ Date: _____

Involvement by Hubbard House staff/volunteers? Yes No Explain: _____

Amount of funds raised? _____ Date funds received: _____

Materials provided: _____ Materials returned: _____