



## **NOVA Third Party Fundraising Event Proposal**

**Contact/Event Coordinator Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Organization/Business Name:** \_\_\_\_\_

**Event Date(s):** \_\_\_\_\_

**Event Sponsors (if applicable):** \_\_\_\_\_

**Briefly describe your fundraising event and goals:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I/We would like the following for our event:**

- Agency speaker
- Agency brochures and information. Specify amount needed: \_\_\_\_\_

Please mail this form to:

NOVA

Attn: Mike Marshall, Development Assistant

2370 York Road, Suite B1

Jamison, PA 18929

or email to [Mike.Marshall@novabucks.org](mailto:Mike.Marshall@novabucks.org)