

Third-Party Fundraiser Application

Help us to know your event. The following form is an application only. You will receive notification of fundraiser approval or denial within 2 business days.

Address:		
City:	State:	Zip:
Contact Person:		
none Number: E-mail:		
Fundraiser Name:		
Description of Fundraiser:		
Date(s) of Fundraiser:	Tir	ne(s):
Name and Address of Facility W	here Fundraiser Will be H	
Name and Address of Facility W	here Fundraiser Will be H	eld:
Date(s) of Fundraiser: Name and Address of Facility W Website: Estimated Funds to be Raised (see	here Fundraiser Will be H	eld:
Name and Address of Facility W Website:	here Fundraiser Will be H	eld:
Name and Address of Facility W Website: Estimated Funds to be Raised (see	There Fundraiser Will be H	□ Over \$25,000

What other organizations receive funding if Idaho Youth Ranch receives less than 100 percent of funds: If approved by Idaho Youth Ranch, are you requesting use of our logo:		
If Yes, please explain your inten	ded use of the logo and any logo specifications you need:	
fundraiser support. Also include	what you will be asking them for. (This information is required consors and donors who may already be involved with other	
Please submit completed applica	tion to marketing@youthranch.org	