



**APPLICATION FOR MERIDEN-WALLINGFORD CHRYSALIS FUNDRAISER AND/OR SPECIAL EVENT**

Thank you for your interest in hosting a fundraising/special event to benefit Meriden-Wallingford Chrysalis, Inc. All of the money raised will assist us in our mission to promote healthy relationships, safe families and a violence-free community.

Please complete this form and submit it to Chrysalis by faxing it to (203) 237-1097 or emailing it to [Linsey@mwchrysalis.org](mailto:Linsey@mwchrysalis.org). When we receive this signed application and once the event is approved, we will contact you to commence coordination of the event.

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address of Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

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

Event description and how it will be promoted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has this been or will be a yearly event: \_\_\_\_\_

Expected Attendance: \_\_\_\_\_ Expected Donation Amount: \$ \_\_\_\_\_

Sponsoring Company(s) name (s) (If any): \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_