

AAMC FOUNDATION EVENTS POLICY

SUMMARY: Special events are designed to raise funds and/or generate awareness of Anne Arundel Medical Center (AAMC) and Anne Arundel Medical Center Foundation, Inc. (the Foundation). These events may include dinners, sports tournaments, auctions, galas, bake sales, fashion shows, house tours, etc. These events are managed and directed by the Foundation. Other events that are not managed by AAMC may result in gifts to the Foundation. It is the policy of the Foundation to uphold strict guidelines regarding the nature of the event and the use of the trademarked Anne Arundel Medical Center name and logo(s).

COMMUNITY-BASED EVENT POLICY: It shall be the policy of the Foundation that any events undertaken by non-AAMC affiliated individuals or organizations for the benefit of any part of Anne Arundel Health System will be required to notify the Foundation in advance of publicizing the event. These events are to be of a nature that they do not rely solely upon the name of AAMC for promotional purposes. If approved, it will be appropriate to accept funds from these events. These gifts must follow all appropriate Foundation gift policies and may be designated by the group to any approved priority of the hospital.

PROCEDURE:

1. Outside organizations wishing to sponsor an event to benefit AAMC shall provide a detailed description of the event and any other pertinent information as determined by the Foundation. A form will be provided by the Foundation for this purpose.
2. Appropriate representative(s) of sponsoring entity are required to sign an agreement acknowledging notification and receipt of Foundation's Special Events Policy. Sponsor agrees to uphold the standards and practices outlined by the Foundation regarding events and collection of funds.
3. Sponsoring entity agrees to make every effort to convey the true nature of the event and clarify that AAMC is not the host of the event, but will be the beneficiary of full or partial proceeds.
4. Sponsoring entity agrees to full disclosure to interested participants regarding the level of financial support pledged to AAMC.
5. All publicity of any kind (including press releases, invitations, advertisements, etc.) must be cleared by the Foundation when AAMC's name is used in connection with the event.

6. Any and all use of the Anne Arundel Medical Center name and/or logo(s) must be reviewed and approved by the Foundation in accordance with internal policies.
7. Costs incurred by this event will be the responsibility of the organizer/organizing group.
8. It is the policy of the Foundation to protect the confidentiality of contact information, including addresses and phone numbers, of Anne Arundel Medical Center donors and volunteers. In special cases, AAMC may offer to distribute limited amounts of materials to Foundation contacts on behalf of the sponsoring party. This function is subject to review for impact on staff time and resources.
9. Sponsoring organizations are solely responsible for securing appropriate permits, licenses, and insurance needed for the event.
10. AAMC shall in no way be held liable for any injury or damage resulting from events, approved or otherwise, which are undertaken by third parties stating that their intent is to benefit the hospital.
11. AAMC reserves the right to refuse any event not considered to be in keeping with the mission of AAMC and/or the goals of AAMC Foundation. I, the undersigned, have been notified of Anne Arundel Medical Center Foundation's Special Event Policy and I have received a copy of this policy. I agree to uphold the standards and practices outlined by the Foundation regarding events and collection of funds.

Name

Organization

Signature

Date

Approved 2011



Community Fundraiser Events Fundraiser Proposal Form

Thank you for contacting Anne Arundel Medical Center Foundation (the Foundation) regarding your proposed fundraiser to benefit Anne Arundel Medical Center (AAMC). AAMC is a not for profit hospital. Philanthropy helps AAMC bring together the best medical and information technologies for patient care within a healing, supportive environment. Please take a moment to summarize your activity by providing the following information.

Today's Date: _____

Event Date: _____ Event Time: _____

Event Name: _____

Event Location: _____

Number of Participants/Guests expected: _____

Briefly describe the event and how funds will be raised:

Financial Goal: _____

Designation: (AAMC department): _____

Name of Organization/Group: _____

Event Coordinator Name(s): _____

Address: _____ State: _____ Zip: _____

Email: _____ Home # _____ Work # _____

Will AAMC be the sole beneficiary? If not, what other causes will be supported?

Desired Expectations from AAMC: _____

Note: All publicity (flyers, newspaper ads, radio, etc.) must be approved by the AAMC Foundation.



Community Fundraiser Events
Contribution Form

Thank you for your support of our fundraising efforts! Anne Arundel Medical Center Foundation is a 501 (c) (3) charitable organization that exclusively administers all gifts on behalf of Anne Arundel Medical Health System. All contributions are tax deductible to the fullest extent of the law. The statement of value for gifts-in-kind is the privilege and responsibility of the Donor. A letter and receipt to acknowledge your generous gift will be forwarded to the attention of the person(s) listed below. **Please let us know how AAMC will be receiving the donation(s).**

Event Name: _____

Company Name: _____

Contact Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

DONATION

(Please do not send cash in the mail).

Contribution: _____

DONATION OF IN-KIND ITEM

Description of Article(s) and/or Service(s)

Item: _____ Value: _____

Item: _____ Value: _____

Contributions should be made payable to
Anne Arundel Medical Center Foundation
2001 Medical Parkway,
Sajak Pavilion, Suite 550
Annapolis, MD 21401
443-481-4747