THIRD-PARTY FUNDRAISING TOOLKIT

CHILDREN’S HOSPITAL

200 Henry Clay Avenue
New Orleans, LA
(504) 896-9375
www.chnola.org
Welcome

Thank you for your sincere interest in helping Children’s Hospital. Please know that your support means the world to us. The hospital depends on the generosity of people like you to continue providing every child treated at Children’s Hospital with the same level of expert medical care that they deserve.

Children’s Hospital is a 247-bed not-for-profit pediatric medical center offering a complete range of healthcare services for children from birth to 21 years. With over 40 pediatric specialties and more than 400 physicians, it is the only full-service hospital exclusively for children in Louisiana and the Gulf South. Each year, Children’s Hospital records more than 160,000 patient visits, with children coming to us from all 64 parishes in Louisiana, almost every state in the nation and several foreign countries.

Event Guidelines

If you are interested in hosting a fundraiser on behalf of Children’s Hospital, we request that you read and review the toolkit before completing the application form. This form will provide us with a clear understanding of your plans and will allow us to add it to our calendar and support your efforts the best we can. We will also be able to verify the legitimacy of your fundraiser should we receive inquiries from the public.

Children’s Hospital is accountable for fund-raising activities using Children’s Hospital’s name. This application form is not a guarantee of approval. It must be submitted to the hospital for review and be approved before any public announcements are made. We must make certain that your fundraiser aligns with the mission of our hospital, that the dates do not conflict with the hospital’s calendar and that the same sponsors are not asked multiple times for support.

Until the application is approved, no announcements can be made and the fundraiser may not be promoted in any way using the Children’s Hospital name and/or logo.

If expenses are greater than money raised by the event, the event organizer is responsible for those expenses. Proceeds must be received within 30 days of the fundraising date or campaign.
Overview

What is third-party fundraising?
Third-party fundraising is any type of fundraising event or program conducted by an individual, group or organization where Children’s Hospital is the beneficiary. Fundraising can be done in the form of a special event, a cause marketing program or as proceeds of sale.

Who can conduct a fundraiser on behalf of Children’s Hospital?
Individuals and organizations can fundraise independently in support of Children’s Hospital. These can be grateful patient families, civic organizations, churches, schools, businesses. Anyone in the community can fundraise to support the areas of greatest need at Children’s Hospital or a specific program of your choice.

How will this toolkit help me?
We hope this toolkit will assist you as you plan to fundraise for Children’s Hospital. Included are frequently asked questions, some tips on how to get started and what to do during and after you’ve fundraised for us. Our goal is to provide you with the tools necessary to be a successful fundraiser for Children’s Hospital.

Where will my donation go?
All donations made to Children’s Hospital will go to our area of most need unless you designate a specific program or area of the hospital.

How can Children’s Hospital help me with my fundraiser?
- Provide a letter of authorization to validate the authenticity of the fundraiser
- Offer feedback on your fundraiser and/or event
- Provide and approve use of our logo on materials related to your fundraiser
- Help you select an area of Children’s Hospital for your donation to support
- Coordinate a check presentation at the hospital after your fundraiser

We are here to support you. However, there are some services we are unable to provide:
- Our tax exemption number
- Insurance or liability coverage
- Permits and/or licenses
- Mailing list of donors and/or vendors
- Children’s Hospital letterhead
- Funding or reimbursement of your expenses
- Publicity (e.g. newspaper, radio, television)
- Guaranteed attendance of Children’s Hospital staff, physicians or patients
Frequently Asked Questions

Can I use Children’s Hospital name and logo?
Once your fundraiser is approved, we will provide you with Children’s Hospital’s logo for your marketing materials. We must review everything with our name and logo before it’s printed or distributed. This includes the use of the Children’s Hospital logo on your website or your company’s website. All Children’s Hospital logos added to websites must be removed no more than 30 days after the conclusion of your fundraiser.

How long does it take to get my Fundraiser Proposal approved?
Proposals will be approved within 10 business days of receipt.

Do I need to create a 501c3 (non-profit) organization to host a fundraiser for Children’s Hospital?
No, anyone can host a fundraiser for Children’s Hospital with our approval. Staff can provide an authorization letter confirming the organizer’s intent to raise funds for Children’s Hospital.

Can someone from Children’s Hospital help me plan my fundraiser, and attend and/or speak at my event?
We are happy to provide guidance, but we do not have the staff to handle the organizational and administrative tasks associated with third-party fundraisers. We do our best to attend events supporting Children’s Hospital, but we cannot guarantee attendance of staff, physicians, patients or volunteers at your event.

Can Children’s Hospital help me get a permit and/or license for my fundraiser?
The organization and execution of the fundraiser is the responsibility of the organizer. The organizer must obtain any necessary permits or licenses.

Can Children’s Hospital provide insurance for my fundraiser?
Because Children’s Hospital is the beneficiary and has no direct involvement with running the fundraiser, we cannot provide insurance certificates. The event organizer is responsible for obtaining insurance if necessary.

Can I use the Children’s Hospital’s Tax Exemption Number?
Because Children’s Hospital is not the host, it is considered a third-party fundraiser. For this reason, you will not be able to use Children’s Hospital’s IRS 501(c)(3) charitable classification, federal tax ID number, or tax-exempt certificate.

Will each of my donors get a receipt?
Children’s Hospital cannot issue charitable tax receipts for donors or sponsors who make payments directly to your third-party fundraiser. If your donor wants a receipt, please be sure the check is made payable to the Children’s Hospital and leave the check in its original form before sending it to the hospital.
Please note that there are complex regulations around the distribution of charitable tax receipts. This includes donations of money, in-kind items and services. Issuing an inappropriate receipt can put our charitable tax status in jeopardy so please do not promise any kind of receipt. For more information about charitable tax receipts please contact the Children’s Hospital’s Development Department.

**How do I open a bank account for my event?**
We recommend you open a non-interest bearing checking account, or benefit account, at a local bank. The account must be opened in the third party’s name. It cannot be opened using Children’s Hospital’s name or financial information.

**Can I pay myself back for expenses I’ve incurred?**
Children’s Hospital cannot fund or financially support community fundraisers. Coordinators are responsible for covering all expenses and cannot be reimbursed by Children’s Hospital. For these reasons, as you start to collect money you may want to keep some funds on hand to help pay your expenses.

**Can we have a check presentation at Children’s Hospital?**
Yes, we can arrange for a check presentation to be held at Children’s Hospital after your fundraiser. Please contact the Development Department to schedule a time.

**Should I send a personal thank you letter or card to my donors?**
Of course! It is important to thank everyone who was involved with your fundraiser!
Getting Started

You may know you want to fundraise for the hospital, but you’re unsure where to start. This list is designed to help you narrow your focus and be more successful!

1. **Form a Committee and Brainstorm.** Bring together a group of enthusiastic people willing to be part of a planning committee and brainstorm ideas for your fundraiser.

2. **Decide on your fundraiser.** Whether you choose to host and event or raise money through your business, make sure it’s something you and the committee can handle.

3. **Create a budget.** You may find this to be a difficult part of the planning process, but it is vital. Try to identify all the expenses involved with your fundraiser (invitations, postage, rental space, signage, food and catering, promotional materials, website, advertising, permits etc.). Next, think about the streams of revenue (ticket sales, items sold, etc.). You should also think about if you will be able to get some items or services donated (food, equipment, printing, etc.) to reduce your costs. This step may make or break your idea so be as thorough as possible. We encourage you to keep your expenses at 20 percent of your budget.

4. **Apply for approval of your event.** Fill out the application now that you have a game plan and send it in for approval. A team member will get back to you within 10 business days of receiving the application.

5. **Schedule the fundraiser.** Select a date and time that is appropriate and convenient for those who will be attending your event. If you are fundraising over a period of time, choose a time of the year you think is best for your potential supporters. Be sure to check community events calendars for conflicting fundraiser.

6. **Stick to a timeline.** A timeline is important in planning a publicity strategy for your fundraiser. Create goals and set target dates to meet those goals.

7. **Tackle the logistics.** Whether you’re hosting and event or fundraising in another way. Start planning the details of what it will take to pull off your fundraiser.

8. **Money management.** You may find that you will need to establish a bank account to accommodate incoming revenue and expenses.

9. **Send in the donation.** We ask that all event proceeds designated for Children’s Hospital be sent to the Development Department at Children’s Hospital within 30 days following the conclusion of your fundraiser.

10. **Say thank you.** Sending thank you letters, notes or e-mails to everyone who participated in your fundraiser is a must.
Don’t Forget

Before Your Fundraiser

Get approval
All fundraisers done on behalf of Children’s Hospital need approval from the Development Department before the hospital’s name can be used. This will allow us to keep track of all fundraising done in the community and help us inform the public about legitimate fundraising efforts.

Have all materials with the hospital logo approved before distribution
The hospital’s Public Affairs Department must review and approval all uses of the hospital logo before they become public. Any use of the hospital logo without approval is not allowed.

At Your Fundraiser

Thank everyone for their support
Every dollar makes a huge difference so please be sure to thank everyone for attending your event or supporting your fundraiser.

Take Lots of Photos
Photographs are a great way to document your fundraiser. If you have sponsors, make sure you take photos with their signage and send it to them. Don’t forget about us! Be sure to capture a couple of pictures for the hospital to possibly use for social media and our publications.

After Your Fundraiser

Send in Your Donation
Mail a check to:
Children’s Hospital Attn: Development Department
200 Henry Clay Avenue New Orleans, LA 70118
  • Checks should be made payable to Children’s Hospital
  • Include a short note explaining how you raised the funds
  • Once we receive your donation, an acknowledgement letter will be sent to you

Send us Photos
E-mail the best 3-5 photos from your fundraiser to: Lynnsey.Belsome@LCMHealth.org

Critique your fundraiser
The only way to improve is to examine what you’ve done.
Date: ___________________________

**Sponsor Information**

Organizer’s Name: ____________________________________________

Company/Organization Name (if applicable): ____________________________

Address: __________________________________ City: __________ State: ______ Zip: ______

Business Phone: _______________ Cell Phone: _______________ Fax: _______________

Email: ____________________________ Company/Organization Web site: ______________________

**Fundraiser Information**

Name of fundraiser: ____________________________ Type of fundraiser: _______________

Date(s): ________________________________ Time: ____________________________

Description of fundraiser (please be specific): __________________________________________

Location: ________________________________

Has this fundraiser taken place before?  □ Yes  □ No  If yes, when and who was the beneficiary?

___________________________________________________________________________

Does your fundraiser require permitting and/or a license?  □ Yes  □ No

*Please note: As with any fundraising event or proposed raffle, please adhere to federal, state and local laws regarding gaming permits.

**Budget/Fundraising**

Will Children’s Hospital be the sole beneficiary of this event?  □ Yes  □ No

(If no, please list other beneficiaries) __________________________________________

Approximate number of people expected to participate: ____________________________

Anticipated gross revenue $ ____________________________

Anticipated expenses $ ____________________________

How will expenses be paid? ____________________________

Anticipated net revenue $ ____________________________

Anticipated donation to Children’s Hospital $ ____________________________

Will the fundraiser be sponsored or underwritten by a company or organization business?  □ Yes  □ No

If yes, please specify all sponsors involved: ____________________________

Price structure of fundraiser (entrance fee, ticket cost, etc.) ____________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________
THIRD-PARTY FUNDRAISING

APPLICATION

Briefly describe how funds will be raised (i.e. ticket sales, collections, sponsorship, auction, raffle, etc.)

________________________________________________________

Will your gift be designated to a specific hospital program?  ☐ Yes  ☐ No

If yes, which one?  ______________________________________

Name of insurer* ________________________________

*Children’s Hospital may require the insuring of any special event/fundraiser. The hospital assumes no liability related to special events conducted on its behalf.

Because the hospital solicits a large number of local businesses, prior approval may be necessary before asking for donations. Please list all businesses, civic or social organizations, or foundations which will be or have been solicited for underwriting, sponsorship, in-kind giving, auction items or other contributions for this event. (Attach an extra sheet if necessary)

________________________________________________________

________________________________________________________

Publicity & Promotions

For publicity purposes, a contact name and number that can be publicly listed:

Name: _________________________________________________

Phone: _________________________________________________

Email: _________________________________________________Web site: _________________________________________________

How will the event be publicized (social media, press releases, flyers, TV/Radio, newspapers, Web site)?

________________________________________________________

Do you plan to use the Children’s Hospital logo or name on event materials?  ☐ Yes  ☐ No

Review and approval must be received prior to printing materials with the hospital logo or name.

Signature: _____________________________________________ Date: _____________________________________________

Please email, mail or fax completed application to:

Children’s Hospital
Attn: Development Department
200 Henry Clay Avenue
New Orleans, LA 70118
Phone: (504) 896-9375
Fax: (504) 896-3964
Email: Lynnsey.Belsome@LCMchealth.org