

WC SUMMER SOIRÉE

Night in White

CHARITY APPLICATION

Name of charity:

Address of charity:

Phone:

Email:

1. Are you a registered a 501© 3 organization? _____
If so, what is your EIN _____
2. In a brief statement, please explain your mission statement.
3. If chosen, what will your organization do specifically with the donation?
4. Have you ever attended the WC Summer Soiree?
If so, which ones? What did you like about event?
5. We appreciate our chosen charities to get involved with event itself through self-promotion, ticket sales, set up and cleanup of event. In what capacity do you think your charity can help?

Please return to wsummersoiree@gmail.com