

# RMHC SWFL Proposed Event Form

(please print)



Ronald McDonald  
House Charities®  
Southwest Florida

**Event:**

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**Brief Description of Event:**

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Event Website (if applicable): \_\_\_\_\_

First Time Event:            Yes \_\_\_\_\_            No \_\_\_\_\_

Sponsor(s): \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

Approx. Number of Attendees (if applicable): \_\_\_\_\_

Projected Dollars and/or In-Kind Goods to be Raised/Collected for RMHCSWFL:

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We agree that all print/video/on-line materials will be presented to RMHCSWFL for approval before they are produced, printed or released: \_\_\_\_\_ Agree

Expectations of RMHCSWFL:

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Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Please return form to: Ronald McDonald House Charities® Southwest Florida, Inc.  
16100 Roserush Court • Fort Myers, FL 33908  
office: 239-437-0202 • fax: 239-437-3521  
Email: [Amy@rmhcswfl.org](mailto:Amy@rmhcswfl.org)