

**APPLICATION FOR NONPROFITS
TO PRESENT A Table AT
WOMAN COME FORTH! GATHERING**

Date of the WCF Gathering you are requesting to have a table. _____

Name of Nonprofit _____

Contact Person _____

Email _____ Web _____

Address _____

City _____ State _____

Zip _____

Phone _____ 2nd # _____

Number of your 501 (C) (3) _____

Number of years your Nonprofit has been operational? _____

Your Mission Statement:

What is the age population you benefit?

What are the services you offer to women?

What are three prioritized goals your nonprofit hopes to reach in 5 years?

- 1.
- 2.
- 3.

If chosen to be present at WCF how do you foresee using the donated funds received from WCF?

Signature: _____ Title _____

Agreement Of Nonprofit For a Presenting Table At WOMAN COME FORTH!

NONPROFIT STATUS

You must have nonprofit status and be in good standing with your state government.

SUPPORT OF WOMEN

Your nonprofit must benefit women or their families. Your mission statement may clarify this but if it does not, please make clear your nonprofit's purpose.

NOTIFICATION OF SELECTION

- ❖ Upon receipt of your application the board members of WOMAN COME FORTH! will consider your nonprofit to be one of the six presenting tables.
- ❖ You will be notified forty (40) to sixty (60) days prior to the event of your acceptance. You will be notified by letter. If you have not been accepted you will be notified by email and then a follow-up repeat email.

WCF GATHERING EVENT

- ❖ Informed staff must be available to be at your nonprofit table during the event. Set up will be the day before the actual event. Tables will be provided for you with the name of your nonprofit on the table. One of WCF's staff will contact you on what you will need for set up.
- ❖ All displays, handouts, and materials are your responsibility to load in and out of the event location.
- ❖ Woman Come Forth is not responsible for any stolen funds, displays, handouts, or materials pertaining to your nonprofit organization.
- ❖ Woman Come Forth will, to the best of their ability, supply persons to watch over the nonprofit area during presenting sessions.
- ❖ All displays must be broken down ninety (90) minutes after the conclusion of the event.

DIVISION OF FUNDS

- ❖ WOMAN COME FORTH! is a free event. We invite the women to donate Ten (10) dollars or more to benefit the six nonprofits that are chosen to have a table at WCF.
- ❖ All donations received will be divided up equally between the six chosen to have a table at WCF.
- ❖ Your check will be mailed to you within thirty (30) days of the conclusion of WCF's Gathering event.

LIABILITY

- ❖ Your nonprofit agrees not to hold WOMAN COME FORTH! liable for any loss of personal or organizational property.
- ❖ Your nonprofit agrees not to hold WOMAN COME FORTH! liable for any negative reactions, (highly unlikely), that you might receive for being a presenter at WCF.
- ❖ WOMAN COME FORTH! is required to have liability insurance to cover injury or death to any one person.
- ❖ Your nonprofit is *not* required to have additional liability insurance. You may choose to have your own insurance for lost or stolen property.

CONDUCT

- ❖ WOMAN COME FORTH! requires that your nonprofit staff conduct themselves in a professional and friendly manner at all times to every attendee and staff at the WCF Gathering.
- ❖ WOMAN COME FORTH! requests that you have adequate materials to hand out according to the anticipated number of attendees. WCF will inform you of that number.
- ❖ WOMAN COME FORTH! requests that you be respectful and interact kindly with all other presenting nonprofits.

INFORMATION

- ❖ WOMAN COME FORTH! will provide you a contact person with their phone number and email address. This person will be available to you throughout the process of preparation and presenting table at the WCF Gathering.
- ❖ WOMAN COME FORTH! highly advises that you attend one of the meetings that shares the vision of WCF. If you cannot attend or miss the opportunity to attend you may contact Faith Donaldson 303-643-8643 to hear more about the WCF vision.

AGREEMENT

I _____, a board member of the nonprofit _____, agree that I have read the above information and on behalf of the nonprofit _____ agree that we will follow the requirements and requests of WOMAN COME FORTH! set forth in the above agreement; submitted with the application to present a table at the WOMAN COME FORTH! Gathering on ___/___/___.

Signature

Title

Date

Please mail your completed application to 24000 US HWY. 40 Golden, CO 80401