



BAGS FOR BUCKS

1244 S. Canterbury Rd, Suite 306, Shakopee, MN 55379

P: 952-496-9232 F: 952-445-3120

E: fundraising@renaissancefest.com

2018 Minnesota Renaissance Festival BAGS 4 BUCKS APPLICATION

| B4B - ORGANIZATION INFORMATION | | | | | | | |
|--------------------------------|--|--|--------|-------|--|---|-----|
| Organization Name | | | | | | | |
| Organization Address | | | | | | Apt./Unit # | |
| City | | | | State | | | Zip |
| Phone: | | | Phone: | | | Fax: | |
| Website | | | | Email | | | |
| Organization Federal Tax ID # | | | | | | (Must be 9 digits long, does not contain letters) | |
| Organization Federal Tax Name | | | | | | (As shown on your Income Tax Return) | |

| PRIMARY CONTACT INFORMATION | | | | | | | |
|-----------------------------|--|--|--|-------|--|--------|----------|
| Contact Name | | | | | | Title: | |
| Contact Address | | | | | | | |
| City | | | | State | | | Zip Code |
| Contact Phone | | | | Email | | | |

| NETWORKING QUESTIONS | |
|--|--|
| How did you hear about the MRF fundraising opportunity? | |
| Primary reason for participating in the MRF Fundraiser? | |
| Why would your organization be successful in the MRF Fundraiser? | |

| FUNDRAISING DATES AVAILABLE | | | | | | | |
|-----------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| | <i>Weekend 1</i> | <i>Weekend 2</i> | <i>Weekend 3</i> | <i>Weekend 4</i> | <i>Weekend 5</i> | <i>Weekend 6</i> | <i>Weekend 7</i> |
| Friday | | | | | | | September 28 |
| Saturdays | August 18 | August 25 | September 1 | September 8 | September 15 | September 22 | September 29 |
| Sundays | August 19 | August 26 | September 2 | September 9 | September 16 | September 23 | September 30 |
| Monday | | | September 3 | | | | |

| POTENTIAL EARNING INFORMATION | |
|---|--|
| How much does your organization wish to earn? | |
| What will the earnings be used for? | |

| PREVIOUS EXPERIENCE | | | |
|--|---------|---------------|---------|
| Has your organization worked at the MRF before? | | | |
| If so, which booths? | | | |
| What did you like most about your previous MRF Fundraising experience? | | | |
| Has your organization worked other fundraisers or events? | | | |
| If yes, please list event(s): | | | |
| What did you like most about previous fundraising event(s)? | | | |
| Does your organization have any of the following experience? | Cooking | Cash Handling | Hawking |

| ORGANIZATION SPECIFICS | |
|---|--|
| Please provide a brief description of your organization: | |
| What is your organization mission? | |
| What year was your organization established? | |
| What is the greatest accomplishment of your organization? | |
| What awards or honors has your organization received? | |

| Please indicate how communication between organization and MRF should be directed: | |
|---|---|
| <input type="checkbox"/> PLEASE CONTACT AND SEND DIRECT CORRESPONDENCE TO OUR ORGANIZATION | <input type="checkbox"/> PLEASE CONTACT AND SEND DIRECT CORRESPONDENCE TO OUR CONTACT PERSON |

| | | | |
|-----------|--|------|--|
| Signature | | Date | |
|-----------|--|------|--|

To expedite the review of your Fundraising Application, please email your completed form to:
Stephanie Whipps, HR & Vendor Relations Director: fundraising@renaissancefest.com

You may also mail the application to the following address:

Minnesota Renaissance Festival
ATTN: Stephanie Whipps
1244 S. Canterbury Rd. Ste. 306
Shakopee, MN 55379

*Last updated January 1, 2018.

Please copy all forms for your records. For questions regarding this form, call 952-496-9232.

