

Important guidelines you need to know

- ♥ When planning an event to support Cornerstone Family Programs you must display our logo as it is supplied to you. To keep with our branding, editing colors, fonts or skewing the dimensions of the art is prohibited.
- ♥ You are responsible for obtaining all the necessary permits and insurance that may be required by the specific venue/location.
- ♥ If you are planning a sporting event, you will need to have participants sign a waiver release liability form. We can help develop one with you if needed.
- ♥ Any items you are planning to sell as a fundraiser must be non-controversial in nature. If you have any doubts, please ask.
- ♥ If you intend on serving alcohol at a public event you must be in compliance with all state and local regulations. We can help if needed.
- ♥ All materials should state the dollar amount or percentage to be donated to Cornerstone Family Programs.



CHILDREN TEENS ADULTS
FAMILIES SENIORS VETERANS

Strengthening our community for over 200 years.



**cornerstone family programs
& morristown neighborhood house**
Better Lives, Stronger Communities

80 Washington Street
Morristown, NJ 07960
P: 973.288.9243
cornerstonefamilyprograms.org



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How We Can Help You

- ♥ We can provide you with a letter of authorization to be used to validate the authenticity of the event and its organizers.
- ♥ We will acknowledge your event on Cornerstone Family Programs media outlets, website and in press releases. *(Please provide this form 30 days prior to your event to allow time to upload/submit)*



We thank you
for hosting a third-party
fundraiser event to benefit
Cornerstone Family Programs.

For over 200 years
Cornerstone Family Programs,
together with
Morristown Neighborhood House,
has provided vital assistance
to our community by
strengthening the lives of nearly
10,000 people each year.

We are grateful to you
for raising funds in support
of our community.



Cornerstone Family Programs Third Party Fundraising Form

Complete this form so that we can help promote your event.



Host your own Fundraising event!

Name or Organization/Individual planning the event: _____

Name of Event _____

Date of Event _____ Time of Event _____

Location of Event _____

Contact Person _____

Address _____

City _____ ST _____ Zip _____

Phone _____ Email _____

Is event open to public? ☐ by invitation only? ☐

Ticket price per person (if applicable) \$ _____

Are you planning to have *raffles/auctions? Yes ☐ No ☐

Please describe _____

***Note:** Licensing is required for NJ Games of Chance.

Please allow 6-8 weeks for municipality to process. Feel free to call CFP for help!

Signature _____ Date _____

Please return completed form to:
Cornerstone Family Programs

80 Washington Street • Morristown, NJ 07960

or email: mbull@cfp-mnh.org