



November 1-3, 2019 at the Jefferson Civic Center

CHARITY APPLICATION

2019 JHM COMMITTEE USE ONLY	
Receive Date:	Received By:
Received Via:	MAIL EMAIL DROP-OFF OTHER
Receipt Confirmation:	
<input type="checkbox"/> Approved:	<input type="checkbox"/> Denied:
Other:	

ORGANIZATION INFORMATION

ORGANIZATION NAME:	
CONTACT NAME(S):	
MAILING ADDRESS:	
PHYSICAL ADDRESS:	
EMAIL:	PHONE NUMBER(S):
WEBSITE:	
CHECK ALL THAT APPLY: <input type="checkbox"/> FACEBOOK <input type="checkbox"/> INSTAGRAM <input type="checkbox"/> TWITTER <input type="checkbox"/> OTHER (PLEASE SPECIFY)	

Is your organization a registered 501(c)(3)? YES NO When was your organization established? _____

Is your organization a local chapter of a larger organization? _____

How many local employees does your organization have? _____

Does your organization have a large volunteer base? _____

Does your organization host any regular fundraising events or drives? If so, please explain. _____

Please provide a short summary of what services your organization provides, to who, and what area(s) it serves. _____

Please provide us with any additional details that would help us in choosing you for this year's Holiday Market charity. _____

The participating charity is required to help promote the Jefferson Holiday Market before and during the event. The participating charity receives a set dollar amount of the Holiday Market event admission fees. In addition, the participating charity is asked to sell gift basket raffle tickets, of which the charity receives the full profit of. The participating charity is required to provide an assortment of baked goods for the Friday night opening reception. Those baked goods donations may be solicited from your organization volunteers or board members, local bakeries, groceries, etc. The participating charity is also responsible for providing volunteers for all three market days, as well as vendor set-up days, and during the market breakdown. The participating charity is encouraged to promote their organization during the Holiday Market event and participate in additional options to raise money (ex: vendor breakfast options, selling left over baked goods, etc.).

Signature: _____ **Date:** _____

Please submit your completed application via USPS mail or Email: 28 College Street, Jefferson, GA 30549 [or] jeffersonholidaymarket@gmail.com