



rentals - production - sales

5445 Broadway, Merrillville, IN 46410 ph: 219.887.9644
www.allinonepartyrentals.com fax: 219.887.9647

Application for donation/discount

Must be submitted 30 days in advance

GENERAL INFORMATION

Date _____
Name of Organization _____
Address _____
City _____ County _____ State _____ Zip _____
Organization Phone Number _____
Contact Person _____ Phone _____

THE EVENT

Name of Event _____
Date(s) _____ Time _____ Est. # of Attendees _____
Location _____
Annual Event? _____ Since What Year? _____
Type of Event (i.e. dinner, festival, show) _____
How does this Event benefit our community? _____
How do you intend to promote the Event? _____

THE DONATION

What type of donation/discount is requested?
Donation of equipment? Or Discount? _____
Type of equipment needed and quantities requesting?
Tables _____ Chairs _____ Concession Items _____
Glassware _____ Flatware _____ China _____
Tents _____ Staging _____
Other _____
Will ALL IN ONE PARTY RENTALS be promoted at the Event if a donation or discount is provided? _____
If yes, in what manner? _____

In exchange for any approved donation or discount, would your organization be willing to do any of the following:

___ Provide All in one party rentals a sponsorship equal to the value of the donation

___ Provide All in one party rentals a table or attendee tickets equal to the value of the donation

___ Provide All in one party rentals the attendee list with contact information

___ Recognize All in one party rentals from the podium during your event

___ All in one party rentals is permitted to mention and/or showcase pictures about the event/sponsorship in their marketing materials

Do you have a major or presenting sponsor? _____ If yes, who? _____

Please list up to 3 other sponsors, and type or amount of their donation/discount:

1. _____ \$ _____

2. _____ \$ _____

3. _____ \$ _____

Has the organization previously requested a donation/discount from All in one party rentals? _____

Date of last request? _____ Was the request granted? _____

If yes, what amount? _____

YOUR ORGANIZATION

Is the organization Tax Exempt under *IRS Code Section 501(c)3*?

PLEASE ENCLOSE A COPY OF YOUR ORGANIZATION'S IRS LETTER STATING THE TAX EXEMPT 501 STATUS

Non-profit Taxpayer's ID Number _____

Legal Name of Organization _____

What rental company(s) does the organization currently use? _____

What is the mission, or purpose, of the organization? _____

Does the organization primarily serve a particular ethnic, religious, or age group; or any other group with a "common bond" (i.e. families with preschool children, etc.)? _____ If so, what group(s)? _____

Signature of Applicant _____ Date _____

Print Name of Applicant _____