



Dear _____:

Thank you for your interest in Special Olympics Idaho, and the wonderful athletes we serve. We are delighted to be working with you in order to support the mission of Special Olympics Idaho. Without the generous support of people like you, we would not be able to do what we do: *provide year-round sports training and athletic competition in a variety of Olympic-type sports for persons eight years of age and older with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in the sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community.*

As I am sure you can appreciate, we at Special Olympics Idaho are extremely proud of our reputation and good name: these are the things that enable us to continue to attract the funds, volunteers and services we need to continue to inspire greatness in those we serve. As a result, we work hard to protect the Special Olympics Idaho name and marks and to make sure they are used properly.

In order to avoid any misunderstandings and to ensure that your fundraiser is a positive experience for all concerned, we have set forth in the enclosed Special Event Proposal and Licensing Agreement the terms and conditions under which you may use the Special Olympics name and marks. (For the sake of convenience, your organization and ours are referred to as "Sponsoring Organization" and "Special Olympics Idaho" respectively.)

Please let us know if you have any questions about this Agreement or if we can provide you with any further information about Special Olympics Idaho. Otherwise, if the terms and conditions set forth herein meet with your approval, please indicate your acceptance by signing in the space provided in the Agreement and returning a fully-executed copy to us at your earliest convenience, either by mail or fax (208) 323-0486. After reviewing the completed Agreement, we will either contact you for additional information and/or return a signed copy indicating our acceptance.

Once again, on behalf of Special Olympics Idaho, and all of the extraordinary and courageous athletes we are privileged to serve, thank you for helping us to inspire greatness!

Sincerely,

Laurie La Follette
CEO



EXTERNAL EVENT REPORTING FORM

1. The Event

In order to raise money to contribute to Special Olympics Idaho, Sponsoring Organization intends to conduct the following fund-raising promotion/event (hereinafter the "Event"): (Describe the Event, including date(s) and location(s) thereof) Please use separate sheet if needed.

2. Proceeds of Event

Sponsoring Organization will contribute *either* "donate a portion of the proceeds (___%) of the net proceeds of the Event (i.e., total revenues less actual out-of-pocket costs incurred)" *or* "a guaranteed minimum amount of \$_____" to Special Olympics Idaho within thirty (30) days following completion of the Event.

3. Event Report

Date of Event: _____ Name of the Event: _____

Gross income: \$_____ Expenses: \$_____

Net Proceeds to Special Olympics Idaho: \$_____ *or*

Guaranteed Minimum Amount of \$_____

Signature/Name of Person Submitting Event Report

Phone Number

Address

City

State

Zip Code

Check made payable to Special Olympics Idaho is enclosed.

Mail donation(s) to:
Special Olympics Idaho
199 E. 52nd Street
Garden City, Idaho 83714

Thank you for your support of Special Olympics Idaho!