

## Beneficiary Special Events

# Guidelines and Application

Thank you for your interest in supporting the health care mission of Arroyo Grande Community Hospital (AGCH). We are grateful for the generous support of friends of AGCH who share in our commitment to provide excellent care to patients and families of the Central Coast and surrounding communities.

Your support will assure that AGCH continues to provide the most innovative treatments and the most advanced technology, with highly trained physicians and medical professionals to heal patients young and old.

# Guidelines for Beneficiary Events

Arroyo Grande Community Hospital is honored by your decision to identify AGCH as the beneficiary of your special event. To ensure all third party events are registered and approved by AGCH, we require:

- All fundraising events for the benefit of Arroyo Grande Community Hospital are approved in advance by the AGCH Foundation.

Evaluative criteria for event review includes:

- Organizational consistency with the AGCH mission and messaging standards;
- Compliance with all federal, state and local laws governing charitable fundraising, including the registration of raffles, the payment of sales tax on auction items, the documentation of in-kind gifts, gift reporting and gift acknowledgment;
- Possession of the appropriate permitting, licensing, and insurance;
- Scheduling that compliments other AGCH events or third party events that benefit AGCH.
- All uses of the name of Arroyo Grande Community Hospital or its related entities are approved in advance of reproduction, printing or distribution of event materials. Such usage is always in compliance with Dignity Health branding standards.
- In naming the beneficiary event, the AGCH program or service is always listed as the event beneficiary by the approved host organization, rather than the event title. As example, “Acme Golf Tournament to benefit Arroyo Grande Community Hospital” rather than “Arroyo Grande Community Hospital Golf Tournament.”

- Collaboration in the solicitation of event sponsors and participants is welcome and encouraged to support your successful event. AGCH is unable to provide lists of donors, physicians, employees or volunteers to host organizations.

- Event organizers agree to hold harmless Arroyo Grande Community Hospital, the AGCH Foundation, and all their officers, directors and employees from any and all claims and liabilities in any way related to the event.

- Event organizers will seek approval from AGCH to repeat events in the succeeding year.

## AGCH staff can assist you in the following ways in accordance with hospital policies:

- Offer advice and guidance on event planning
- Provide a letter of authorization to be used to validate the authenticity of the event and its organizers
- Approve the use of the AGCH logo
- Promote the event on the AGCH Foundation website
- Provide AGCH program information as available to distribute at the event
- Receive and acknowledge event contributions that are payable to the AGCH Foundation
- Attend events or check presentations as schedules permit

## AGCH staff are unable to:

- Extend our tax exemption to you
- Provide funding or reimbursement for event expenses
- Solicit sponsorship revenue or event participants
- Provide mailing lists of donors, vendors, board members, physicians, employees or volunteers
- Distribute event flyers throughout the hospital
- Host your event on the hospital campus
- Provide media coverage for your event

Our goal is to assist you in achieving a successful outcome for your event. Thank you. Your concern and support for the provision of excellent care for AGCH patients and families is appreciated!

# Special Event Application

Thank you for your interest in hosting an event to benefit the programs and services of Arroyo Grande Community Hospital. Please submit this completed application to:

**Arroyo Grande Community Hospital Foundation**  
345 S. Halcyon Road / Arroyo Grande, CA 93420  
Phone: 805-994-5421  
montisa.lopez@dignityhealth.org

## Information About You

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Organization name (if applicable): \_\_\_\_\_

Website (if applicable): \_\_\_\_\_

Please describe your organization: \_\_\_\_\_  
\_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Information About Your Event

Event Name: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event location: \_\_\_\_\_

Event description: \_\_\_\_\_

Primary Event Organizer: \_\_\_\_\_ One-time or recurring event: \_\_\_\_\_

Type of donation(s):  Cash  In-Kind  Both Anticipated donation: \$ \_\_\_\_\_

AGCH program your event will support: \_\_\_\_\_

Will proceeds benefit other organizations?  Yes  No

If yes, please list: \_\_\_\_\_

Why did you choose AGCH? \_\_\_\_\_

How can we help? \_\_\_\_\_

Please indicate the date that funds will be received by AGCH: \_\_\_\_\_

*I, \_\_\_\_\_, agree on behalf of the organization  
I represent that if the event I wish to coordinate is approved by Arroyo Grande Community  
Hospital, I agree to abide by the Beneficiary Special Events Guidelines.*

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Event Organizer's Signature

Date