

St. Mary Magdalene
Outreach Request Form ~ Revised February 2006

REQUEST FOR OUTREACH

<p>Submitted by _____ (your name)</p> <p>Submitted on (date) _____ / _____ / _____</p> <p>Organization Name _____</p> <p>Organization Address _____</p> <p>City, State Zip _____</p> <p>Organization Contact _____</p> <p>Phone Number _____</p> <p>Is the organization a 501.C.3? (Y/N) _____</p>	<p>This Request is for (check <u>all</u> that apply):</p> <p><input type="checkbox"/> Money \$ _____</p> <p><input type="checkbox"/> Service Time</p> <p><input type="checkbox"/> Goods</p> <p>Donations to be:</p> <p><input type="checkbox"/> One time</p> <p><input type="checkbox"/> Ongoing (add frequency) _____ (Weekly, Monthly, Annually, etc.)</p> <p>Would you like to discuss your nomination with the Outreach Committee? (Y/N) _____</p> <p>If youths (<18) will be involved in activities, will you read and comply with SMM's youth policy? (Y/N) _____</p>
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Organization's **Purpose/Mission** _____

Organization's **audience/recipients** _____

Can you provide **demographic information** for the recipients (#'s age, sex, etc.?) _____

How does the organization **help** the above (short-term giving, long term effects or both?) _____

How does the organization **treat** the above (please describe any personal observations you have.) _____

How does the organization get most of its **funding**? _____

Is the organization an Episcopal, Christian or otherwise **Faith-Based** group? (Explain) _____

How do you envision St. Mary's helping and **how will our help** be used? (Funding, goods, work, or a combination?) _____

How do you see this proposal **instilling Christian values in our congregation** and providing opportunities to leverage the potential involvement of the congregation as a whole? _____

Is there a **history with St. Mary Magdalene**? Please explain. _____

Specifically what is wanted from us? _____

Are there any **potential liabilities** (health and safety of our parishioners? Are there any liabilities for SMM? Is there a waiver liability to sign? _____

When is our donation needed? _____

Use reverse side if needed. Please put this form in the outreach box when completed. Thank you!