



THE IMPERIAL COURT OF NEW YORK SPECIAL EVENT PROPOSAL FORM

Name of Event: _____

Date: _____ Time: _____

Location: _____

Admission: _____

Brief Description of Event: _____

Name of Beneficiary: _____

Beneficiary Contact Person: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Brief Description of Beneficiary: _____

Please check or fill in where applicable

_____ An Event for Court Members Only

_____ A Public & Court Event Attended Event

_____ This Event is Produced Solely by the Court

_____ This Event also has a Non-Court Producer or Co-Producer

Legal & Court Name of Court Producer: _____

Name of Non-Court Producer: _____

Legal & Court Name of Court Co-Producer: _____

Name of Non-Court Co-Producer: _____

Estimated Production Expenses

Tickets: _____ Printing: _____

Advertising/PR: _____ Raffles: _____

Misc. Supplies: _____ Auction Items: _____

Mercandise: _____ Food: _____

Other: _____ Other: _____

Total Estimated Production Cost: _____

Name of Sponsor: _____ Items Donated/Discounted: _____

Name of Sponsor: _____ Items Donated/Discounted: _____

Name of Sponsor: _____ Items Donated/Discounted: _____

Projected Attendance: _____

Projected Net Income: _____

Percentages: Please check or fill in where applicable

Please note, no less than 20% of each Event's Net Proceeds go to the Imperial Court of New York

___ 100% of Gross/Net goes to the Court

_____ % goes to the Court

_____ % goes to the Court

Proposal submitted by:

Legal Name: _____ Date: _____

FOR USE BY THE BOARD OF DIRECTORS

_____ Approved _____ Not Approved

Authorized Signature: _____ Date: _____