



NON-PROFIT APPLICATION

Date: _____

Name of Organization: _____

Address: _____

Federal Tax ID # _____

Website: _____

Brief description of whom the Organization Benefits: (Attach separate sheet if necessary).

Total Operating Budget: \$ _____

Total Administrative Salaries: \$ _____

Participation in *Raising Dough: Social Responsibility*, as well as the amount of money raised once selected as a recipient, is contingent upon your ability to motivate your supporters. Please describe in detail how your organization will motivate your supporters to vote for you, to support you through social media, and to attend a DZ Restaurant the night of your event. (Attach separate sheet if necessary).

In addition to this application, please enclose the following documentation:

- Proof of your 501(c) 3 status

Contact Person: _____

Title/Position: _____

Phone Number: _____

E-mail Address: _____

Preferred Featured Months: (Please list three)

Mail Application to:
Bill Gathen, Director of Marketing, DZ Restaurants, Inc.
63 Putnam Street, 2nd Floor, Saratoga Springs, NY 12866 (518.583.1142)