



# APPLICATION FORM

## ORGANIZATION INFORMATION (i.e., Group holding Fundraiser)

Organization Name \_\_\_\_\_

Organization Address \_\_\_\_\_

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

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

Website Address (if any) \_\_\_\_\_

Organization State Sales Tax ID # (if any) \_\_\_\_\_

(Not required to receive Fundraising pricing; however a copy of your state Sales & Use Tax Exemption Certificate is required prior to purchase if the organization wishes to claim exemption from state sales tax where applicable.)

Type of Organization:     Educational     Religious     Community     Charitable     For-Profit Business\*

## CONTACT INFORMATION (Person in-charge of, or responsible for, your Fundraiser)

Name \_\_\_\_\_ Affiliation with Organization/Title \_\_\_\_\_

Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Preferred Contact Phone # for the date of your pick-up/delivery ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail \_\_\_\_\_

## PURPOSE OF FUNDRAISER\*

\_\_\_\_\_

\*If your Fundraiser is **not for the benefit of your organization** OR if you are a **For-Profit** organization, please indicate the organization/cause that will benefit from the proceeds of your Fundraiser (note: verification required prior to approval)

Benefitting Organization/Cause Name \_\_\_\_\_

Contact Name at Benefitting Organization/Cause \_\_\_\_\_

Contact Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_

## PROPOSED DATE OF FUNDRAISER \_\_\_\_\_

I certify that I represent the Organization applying to purchase Krispy Kreme Fundraising products, that I have read the accompanying Qualifying Requirements and we meet the guidelines as stated and that any proceeds from any re-sale of Fundraising products purchased by this organization will be used for the purpose stated above and not for individual/commercial gain or profit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## COMMENTS

\_\_\_\_\_  
\_\_\_\_\_

*This portion is to be filled out by Krispy Kreme shop manager:*

Date received by Krispy Kreme \_\_\_\_\_ Shop # \_\_\_\_\_ Approved:  Y  N

Shop Manager's signature \_\_\_\_\_

# QUALIFYING REQUIREMENTS

Krispy Kreme Fundraising programs are provided exclusively to assist groups and organizations who are raising funds to benefit the types of causes listed below. The Fundraising pricing structure reflects Krispy Kreme's commitment to helping our communities and is not designed to provide discounted pricing to individuals or groups to use our products for personal gain and/or commercial profit or for any purpose other than those described below.

Both for-profit organizations and not-for-profit organizations may be approved to conduct a Krispy Kreme Fundraiser when the Fundraiser proceeds will be fully used to benefit a group/cause that is one of the following types (verification required for approval):

**EDUCATIONAL** – proceeds are being used to support a school or educational institution or a school-related organization (e.g., club/student/parent group; athletics; band/choral; school equipment; student development; scholarships).

**RELIGIOUS** – proceeds are being used to support faith-based activities or church-related organizations (e.g., youth group; missions; benevolent programs; building fund; congregational support).

**CHARITABLE** – proceeds are being used to support a registered 501(c) charitable organization.

**COMMUNITY** – proceeds are being used to support community-based activities devoted exclusively to charitable, educational, or recreational purposes and not for individual or commercial gain.