



**Alliance Program**

**Greater Giving Partner Application**

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

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web site: \_\_\_\_\_

Who is your primary contact person(s) at Greater Giving? \_\_\_\_\_

Do you have Business Tax ID #?  Yes  No

What do you hope to gain by participating in the Greater Giving Partner Program?

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

Please provide a brief overview of your company/services, including what makes you unique in the marketplace.

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

Describe additional services that you provide to the nonprofit industry.

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

How many years have you been in business? \_\_\_\_\_

How many people work in your organization? \_\_\_\_\_

How many benefit auctions are you directly involved with each year? \_\_\_\_\_

How many other types of Fundraisers are you directly involved with each year? \_\_\_\_\_

What other types of fundraisers do you support? \_\_\_\_\_

\_\_\_\_\_



Please select which category best describes the majority of your events:

- Raise under \$50,000
- Raise \$50,000 - \$200,000
- Raise \$200,000 - \$500,000
- Raise \$500,000 +

Do you conduct seminars or speak as an industry expert?  Yes  No

In which states are you licensed to do business?

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What industry certifications do you hold? (Please List) \_\_\_\_\_

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What insurance coverage do you carry? \_\_\_\_\_

Errors and Omissions? Yes No Licensed/Bonded  Yes  No

How do you generate new business?

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Please share any goals or major changes you see for your business over the next year relevant to your Greater Giving partnership.

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To complete this application, please include any industry certifications and three client or peer references to this application including name, organization name, and contact information. Return the completed form via fax or email attention: Debby Roth-Bush, [partners@greatergiving.com](mailto:partners@greatergiving.com), fax: 503-597-0379, ph: 800-276-5992 ext. 559.

Thank you for interest in becoming a member of the Greater Giving Partner Program. For more information about Greater Giving visit [www.greatergiving.com](http://www.greatergiving.com)

*Acceptance into the Greater Giving Partner Program is subject to review by Greater Giving. Automatic acceptance into the program is neither expressed nor implied. All information provided on this application will be kept strictly confidential.*