



National Niemann-Pick Disease Foundation, Inc.  
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## Event Information Form

|   |  |                     |  |                     |  |                    |  |
|---|--|---------------------|--|---------------------|--|--------------------|--|
| <p>We can assist you with publicity for your fundraising event, such as with a press release and posting to our Web site. Please help us get started by telling us the basics and a few details about your event, your community, and your family. (Think “Who, What, Where, When, Why and How”) We will draft a press release and return it to you for additions, changes, and distribution to your local/regional media. We may need to contact you for further information. Please complete this form, save it to your computer, then email it to us, or print a copy and mail or fax it to us. Attach additional pages if necessary. If you need assistance, please contact the NNPFD Central Office at the numbers above. Thank you!</p> |  |                     |  |                     |  |                    |  |
| Your Name   |  | Phone               |  |                     |  |                    |  |
| Address   |  | Email               |  |                     |  |                    |  |
| City, State, Zip  |  |                     |  |                     |  |                    |  |
| Event Name  |  |                     |  |                     |  |                    |  |
| Event Date(s)   |  |                     |  |                     |  |                    |  |
| Event Start and End Times   |  |                     |  |                     |  |                    |  |
| Event Location (Name, address, special amenities, etc.)   |  |                     |  |                     |  |                    |  |
| Event Sponsors/Collaborators  |  |                     |  |                     |  |                    |  |
| Event is In honor of/In memory of   |  |                     |  |                     |  |                    |  |
| Family involvement in the community (affiliations with organizations, businesses, church, schools, extracurricular activities, sports, etc.)  |  |                     |  |                     |  |                    |  |
| Event description (include highlights, special activities, concessions, appearances by celebrities, raffles, auctions, etc.)  |  |                     |  |                     |  |                    |  |
| Event needs (donations of goods/services, volunteers, cash donations, sponsorships, etc.)   |  |                     |  |                     |  |                    |  |
| Who should readers contact for more information? (include contact details if different than above)  |  |                     |  |                     |  |                    |  |
| Other information that might be helpful in publicizing the event  |  |                     |  |                     |  |                    |  |
| Grants/donations/matching funds may be available from Walmart, Walgreen’s, CVS, Thrivent Financial, or service organizations such as Lions, Knights of Columbus, Rotary, Kiwanis, PTA, etc. Which of these exist in your community?   |  |                     |  |                     |  |                    |  |
| Office use  |  |                     |  |                     |  |                    |  |
| Date rec’d  |  | Rec’d by (initials) |  | Release sent (date) |  | Sent by (initials) |  |
| Notes/Follow-up, etc.   |  |                     |  |                     |  |                    |  |