



# OLD FASHIONED ICE CREAM



## NON-PROFIT FUNDRAISER PROGRAM

Thank you for your interest in fundraising opportunities at the Orange County Market Place. In response to your organization and others like yours, we have reintroduced the Old Fashioned Ice Cream Fundraising Program.

Since its inception in 1969, the Orange County Market Place has been active in the community in many ways, including our work with nonprofit organizations for the betterment of the community. To help address the fundraising needs of organizations like yours, the Market Place developed a signature sponsorship program. Originally developed in response to the September 11, 2001 tragedy, this program has proven beneficial in aiding community groups with their fundraising efforts.

Our Old Fashioned Ice Cream Stand at the Market Place features a rich, vanilla ice cream bar dipped in creamy milk chocolate and rolled in freshly roasted almonds or chocolate sprinkles for \$4.50 (price subject to change). The nonprofit groups operating the concession stand earn the net profits of sales during their selling day (see agreement for full details).

Getting started is simple! Complete the following application and submit for review. Once your group is approved, more detailed information will follow with regards to procedure. Your organization's representative is responsible for securing and overseeing the arrival of volunteers. We recommend having your volunteers work in shifts from opening at 10am to closing at 4pm.

Your organization will provide a banner to display at the Old Fashioned Ice Cream Stand with your organization's information. Recommended size is 3'x5'. We encourage organizations to promote your fundraiser in advance through your own mailing lists, newsletters, website, social media, etc. The OC Market Place Community Stage sits adjacent to Old Fashioned Ice Cream Stand. If fitting, this space can be used for groups to showcase and promote their organization or put on demonstrations or excerpts (if you're a local theater, dance group, chorus group, etc.).

The Orange County Market Place will supply all food products, training, supervision, POS systems, and equipment necessary for the operation of the Old Fashioned Ice Cream Stand.

Thank you for your interest and we wish you the best in all your fundraising endeavors!

-OC Market Place Management



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## NON-PROFIT FUNDRAISER REQUEST FORM

For questions, please contact Adela Generally at Adela\_Generally@comcastspectacor.com

Type or print clearly. All lines must be filled in. Incomplete or illegible requests will not be accepted. Please note, this is not a guarantee of participation. All requests will be reviewed and organizations notified if they are accepted to participate.

Individual's Full Name: \_\_\_\_\_  
Last Name First Name Middle

Cell Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Non-Profit Name & Category: \_\_\_\_\_

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

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

Organization Description: \_\_\_\_\_

\_\_\_\_\_

Fundraising Dates of Interest. Please include three options:

\_\_\_\_\_

**Please Include the Following:**

- 501(c)3 Non-Profit Tax Status Form Verification from IRS, please include copy.**  
[Schools and Military Groups may provide a letter of attestation on letterhead.]
  - A letter outlining what your group does and what you intend to do with the money raised.**
  - A list of volunteers in your group [Must be at least 16 years of age or older]**
  - Contact Information Sheet of all NFP Organization Officers**
  - Copy of your Organization's W9 for payment**
  - Copy of General Liability Insurance**
- (Must meet OCMP requirements, see attached. Daily insurance is available for purchase \$8 cash only some restrictions may apply.)

**NPF Contact Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email completed forms to [adela\\_generally@comcastspectacor.com](mailto:adela_generally@comcastspectacor.com).**

**Confirmation of receipt will be made via email or phone and organization vetted for approval at that time. Once you have been approved, you will be given further instruction on fundraising procedure.**

\_\_\_\_\_

**OFFICE USE ONLY:**

- |   |  |                           |
|---|--|---------------------------|
| <input type="checkbox"/> Accepted Group | <input type="checkbox"/> 501(c)3 Verification                  | Date of Fundraiser: _____ |
| <input type="checkbox"/> Denied Group   | <input type="checkbox"/> Letter of Intent                      |                           |
|   | <input type="checkbox"/> List of Volunteers                    |                           |
|   | <input type="checkbox"/> Signed Not-for-Profit Group Agreement |                           |
|   | <input type="checkbox"/> Copy of General Liability Insurance   |                           |
|   | <input type="checkbox"/> NFP Contact Information Sheet         |                           |
|   | <input type="checkbox"/> Copy of NPO W9                        |                           |



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## Orange County Market Place Non-Profit Organization Insurance Requirements

All Permittees (NPO) shall provide evidence of insurance protecting the legal liability of Ovations Fanfare, L.P. dba Spectra from occurrences as to bodily injury liability, property damage liability, personal injury liability, and contractual liability which are limited to the operations of the Permittee.

- I. The Permittee shall provide Ovations Fanfare, L.P. dba Spectra with an original certificate of insurance, lawfully transacted, which sets forth the following information:
  - A. Insurance requirements for individual vendors:
    1. **\$1,000,000 per occurrence/\$1,000,000** general aggregate annually (where an aggregate limit is applicable to the policy), for all hazards (including contractual liability and completed operations), for all damages caused by personal injury, bodily injury, and property damage. \$1,000,000 per occurrence/\$1,000,000 aggregate per specialty vendor for all damages caused by personal injury, bodily injury, property damage, including products and contractual liability.
    2. The NPO must be a “Named Insured” under the policy.
    3. **The Permittee’s insurance must name “Ovations Fanfare, L.P. dba Spectra dba Orange County Market Place, its agents, officers, servants, and employees” as “Additionally Insured” with respect to the Named Insured’s operations at the Orange County Market Place, 88 Fair Drive, Costa Mesa, CA 92626.**
    4. **The Permittee’s policy must state that it will be primary and not contributory with any insurance purchased by Ovations Fanfare, L.P. dba Spectra for its own operations.**
    5. Ovations Fanfare, L.P. dba Spectra must receive 30 days notice of cancellation or non-renewal from the vendor’s insurer.
    6. The Permittee’s policy must cover all negligent acts of the Permittee’s occurring as a result of their operations at the Orange County Market Place. No limitations will be accepted.
- II. **IN ADDITION, OVATIONS FANFARE, L.P. DBA SPECTRA IN ITS SOLE DISCRETION MAY REQUIRE HIGHER LIMITS AND/OR ADDITIONAL COVERAGE FOR SUCH ACTIVITIES AS IT MAY DEEM NECESSARY.**