

Ovations –

Catering to the Highest Acclaim

Date: _____

NFP Contact Information Sheet
2010/2011

Name of Organization: _____

Primary Contact will be:

Name _____

Address _____

City, State, Zip _____

Telephone Numbers:

Work _____

Home _____

Cell _____

Fax _____

Email address _____

Co-Leader will be:

Name _____

Address _____

City, State, Zip _____

Telephone Numbers:

Work _____

Home _____

Cell _____

Fax _____

Email address _____



Federal ID #: _____

(MANDATORY) Please attach a Copy of your Group's Federal ID Certificate, Employer Identification Certificate or a signed W-9 with the EIN or FIN & your 501 C 3 or any document showing your NOT for Profit Status.

Total Members in Your Group:

Adults _____

Teens _____
(16 & over)

Total Members you can furnish for each Event

Adults _____

Teens _____
(16 & over)

Treasurer will be:

Name _____

Address _____

City, State, Zip _____

Telephone Numbers:

Work _____

Home _____

Cell _____

Fax _____

Email address _____

All checks should be made payable to:

All checks should be mailed to: Name _____

Address _____

City, State, Zip _____

Telephone _____

Email Address _____

Next Step:

1. Complete the above application.
2. Provide Federal ID Number on a signed W-9 – Please note that this is not the same as a tax exempt number.
3. Supply 501 (C) 3 Non-Profit Certificate or proof of Non-for-profit status.
4. Email all documents to info@ovationsatlanta.com