



1244 S. Canterbury Rd, Suite 306, Shakopee, MN 55379  
 P: 952-496-9232 ext. 264 F: 952-445-3120  
 E: hr@renaissancefest.com

## 2016 Minnesota Renaissance Festival

### 16 DAY ORGANIZATION APPLICATION

16 DAY - ORGANIZATION INFORMATION								
Organization Name								
Organization Address						Apt./Unit #		
City				State			Zip	
Phone:			Phone:			Fax:		
Website				Email				
Organization Federal Tax ID #					(Must be 9 digits long, does not contain letters)			
Organization Federal Tax Name					(As shown on your Income Tax Return)			

PRIMARY CONTACT INFORMATION								
Contact Name					Title:			
Contact Address								
City				State			Zip Code	
Contact Phone				Email				

NETWORKING QUESTIONS	
How did you hear about the MRF fundraising opportunity?	
Primary reason for participating in the MRF Fundraiser?	
Why would your organization be successful in the MRF Fundraiser?	

FESTIVAL DAY SPECIFICIS					
How many volunteers will be available per day?			Average age of Volunteers?		
Booth Choice:	#1:		#2:		#3:

<i>Coordinators to Supervise and work in booth(s):</i>			
Primary Contact:			Phone:
Secondary Contact:			Phone:

POTENTIAL EARNING INFORMATION	
How much does your organization wish to earn?	
What will the earnings be used for?	

PREVIOUS EXPERIENCE			
Has your organization worked at the MRF before?			
If so, which booths?			
What did you like most about your previous MRF Fundraising experience?			
Has your organization worked other fundraisers or events?			
If yes, please list event(s):			
What did you like most about previous fundraising event(s)?			
Does your organization have any of the following experience?	Cooking	Cash Handling	Hawking

ORGANIZATION SPECIFICS	
Please provide a brief description of your organization:	
What is your organization mission?	
What year was your organization established?	
What is the greatest accomplishment of your organization?	
What awards or honors has your organization received?	

Please indicate how communication between organization and MRF should be directed:	
<input type="checkbox"/> <b>PLEASE CONTACT AND SEND DIRECT CORRESPONDENCE TO OUR ORGANIZATION</b>	<input type="checkbox"/> <b>PLEASE CONTACT AND SEND DIRECT CORRESPONDENCE TO OUR CONTACT PERSON</b>

Signature		Date	
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To expedite the review of your Fundraising Application, please email your completed form to:  
Stephanie Whipps, HR & Vendor Relations Director: [hr@renaissancefest.com](mailto:hr@renaissancefest.com)

You may also mail the application to the following address:

**Minnesota Renaissance Festival**  
**ATTN: Stephanie Whipps**  
**1244 S. Canterbury Rd. Ste. 306**  
**Shakopee, MN 55379**

\*Last updated November 12, 2015.

Please copy all forms for your records. For questions regarding this form, call 952-496-9262 ext. 264.

