The board, staff and patients of the New Orleans Musicians’ Clinic and Assistance Foundation (NOMC&AF) are deeply grateful for your support of our mission:

To keep New Orleans’ musicians and tradition bearers ALIVE by fostering a culture of self-care and providing primary care, mental health, social services and advocacy regardless of the patient’s ability to pay.

NOMAF SPONSORSHIP GUIDELINES
The NOMC&AF’s primary concern is the health and welfare of New Orleans’ musicians and tradition bearers. We value prevention, wellness and sustainability by expecting the highest standards of conduct from all who represent our mission of cultural empowerment. We must work together to overcome the dire health disparities in our community.

Donations are always appreciated and formally acknowledged to meet all IRS requirements. The following guidelines are mandatory from those who represent the NOMC&AF:

ALCOHOL, TOBACCO & GAMING
Events benefiting NOMC/AF can never be sponsored by alcohol, tobacco and/or gambling companies, because these are addictions we strive to help our patients overcome. Recognition of these companies in a promotional capacity (e.g. press releases, promotional appearances, etc.) before, during and after the event is strictly prohibited.

PERFORMER PARTICIPATION & FEES
Earning a living wage through performance is the first way in which we can help performers sustain themselves. For this reason, New Orleans’ performers should not be asked to donate their services on the NOMC&AF behalf. The NOMC&AF strives to build sustainability for local performers, and any efforts to support its community mission must include respect and remuneration for performers.

INVOLVEMENT OF NOMC&AF STAFF
The primary function of the NOMC&AF staff and board is to support the healthcare and social service needs of our 2,500 patients. Event producers must agree to take full responsibility for the promotion, coordination and execution of benefit. Due to our foundation guidelines, we cannot invest any financial resources to sponsor music, nor may NOMC&AF act as a fiscal agent for a benefit produced by a third party.

I/we ____________________________________________ (name of event producer(s)/organization) have read and acknowledged the terms of this agreement

EVENT NAME _____________________________________ EVENT DATE ____________________

EVENT LOCATION ______________________________________

PERCENTAGE (OR AMOUNT) OF PROFITS BEING DONATED FROM EVENT TO NOMAF ________________________________

VEP SIGNATURE ______________________________________ DATE ____________________

VEP PRINTED NAME ______________________________________

NOMAF REPRESENTATIVE APPROVAL ______________________ DATE ____________________

FOR MORE INFORMATION, PLEASE CONTACT
FOUNDATION OFFICE | DONATIONS@NOMAF.ORG