



CREATING ***UNSURPASSED***
CUSTOMER EXPERIENCES



GROUP FUNDRAISING

Raise money for your organization
with Rhino Sports & Entertainment Services

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VISIT OUR WEBSITE:

rhinosportsandentertainment.com

INTRODUCTION

WELCOME TO RHINO SPORTS & ENTERTAINMENT!

Here at Rhino Sports & Entertainment Services, we **LOVE** football. It's a big part of the fabric of our lives...

Winning games. Managing stadiums. Having successful events.

But while those things are important, the most gratifying part of our work is serving our fans. Whether it's the sales team accommodating a special ticket need, a parking attendant greeting a guest with a smile or an usher helping a family to their seats, the culture at Rhino Sports & Entertainment Services is focused on one thing:

Unsurpassed customer service.

Customer service is more than a buzz word, it's who we are. At Rhino Sports, we're dedicated to the community and providing excellent face-to-face interactions with the fans we proudly serve.

WE WANT TO HELP YOU RAISE MONEY FOR YOUR ORGANIZATION!

Rhino Sports & Entertainment Services believes in the importance of giving back to the community. We would like to extend an opportunity for you to raise money for your organization by volunteering to staff football games.

Interested in learning more? Continue reading this packet to find out if your organization qualifies for our group fundraising program.

DONATION DETAILS

WHO CAN VOLUNTEER?

Rhino Sports welcomes local organizations and non-profits to apply for our group fundraising program. Groups must have a minimum of 10 and a maximum of 50 volunteers. Groups wishing to have more than 50 volunteers are asked to contact the local Rhino office for more information.

All volunteers must be at least 18 years of age to participate in the fundraising program.

HOW WILL YOU RECEIVE YOUR DONATION?

Your group's organization will receive a check approximately two weeks after the event in which you volunteered. The donation will be mailed to the address specified on the group contact form. Those that wish to have money donated to a charity different from their organization, will receive confirmation and a receipt of donation from Rhino Sports.

THE PROCESS

Raising money for your organization has never been so easy! Follow the steps below to start your fundraising journey today!

Step 1: Provide us information on your group

Interested in volunteering with us? Please fill out and acquire the forms on page 8 to provide us with information about your group.

Step 2: Fill out a commitment/intention form

Next, you will be asked to indicate which of the games you intend on volunteering for using the form on page 9 or using the online form sent to you in your welcome e-mail. You will also need to fill out your W-9 and provide a certificate of liability.

Step 3: A Rhino representative will contact you

A Rhino representative will contact you approximately one week prior to game day to confirm your group's ability to work. The representative will also give you details about the check-in process.

Step 4: Volunteer at the event

When your group checks-in to their designated location on game day, Rhino will explain your volunteer responsibilities and prepare you for your assignments. As a volunteer, you will act as a ticket scanner and/or usher.

Step 5: Receive your donation

Your organization will receive the equivalent of a per hour rate, per volunteer within your group. Donations will be sent via check to your organization's mailing address within the two weeks following the event.

TASK DESCRIPTIONS

As a group volunteer, you will be assigned to either a ticket scanning or ushering position. On the day of the event, you will attend a pre-game meeting with Rhino staff, in which game day operations will further be explained. You will also receive further training at your assigned post, where you will be able to ask questions and express any concerns that you may have. The supervisor will also be present for the duration of your assigned shift.



TICKET SCANNER

- ✓ Welcome all fans to the stadium
- ✓ Check all tickets for date & game number
- ✓ Scan each ticket
- ✓ Make sure customers with credentials or special access use the correct entrance
- ✓ Be able to stand for extended periods of time in the elements
- ✓ Be able to give directions to fans as needed
- ✓ Be able to read a small screen when necessary

USHER

- ✓ Welcome all fans to the stadium
- ✓ Ask for ticket so that you may assist them to their seats
- ✓ Be able to give directions to fans as needed
- ✓ Assist fans with lost children or belongings
- ✓ Assist fans as they leave and thank them for coming to the game
- ✓ Walk up and down your entire section once every quarter
- ✓ Know where things are in the stadium. Be knowledgeable of your surroundings

UNIFORM POLICY



SHIRTS & JACKETS

As a group volunteer, you will be provided with a uniform shirt and jacket. Your uniform shirt is to be tucked in and jackets will be zipped 3/4 up or all the way. Shirts and jackets will be assigned to you on a game-by-game basis at check in. All uniforms issues by Rhino Sports are company property and must be returned at the end of each shift. Please note that you will be charged for any items that are not returned. You must wear a black or white shirt (with no collar) underneath. Any visible clothing you have should be black, white, or gray (winter months only).

PANTS - BLACK

As a group volunteer, you must provide your own slacks. Appropriate color is plain black dress pants. A black belt is also required. Leggings, yoga pants, sweatpants, pants with designs, blue or black jeans, black gym shorts or athletic pants, flared bottoms, or wide widths are not permitted. Pants must be worn at the waistline. Fit and length must be appropriate. Be sure your uniform fits appropriately, neither too tight nor too baggy.

HATS

As a group volunteer, you are permitted to wear only the hat that is provided as part of your uniform or any approved Rhino hat. No other non-issued headwear or neckwear will be allowed for use in volunteering.

UNIFORM POLICY

SHOES

You will be required to provide a basic low-cut black athletic or dress shoe. Black socks are also required. Black all-weather boots are permitted during inclement weather and winter months.

NAME TAG/CREDENTIALS

As a group volunteer, you will be provided a name tag/credential at check in. Name tags must be turned in at the end of your scheduled shift along with the rest of your uniform.

GROOMING STANDARDS

As a group volunteer, you are expected to maintain the following standards:

- ✔ **Hair:** Should be neat, clean, natural in color & well groomed.
- ✔ **Facial hair:** Should be neat, clean, natural in color & well groomed.
- ✔ **Tattoos:** All tattoos must be covered at all times, no exceptions.
- ✔ **Jewelry:** Should be kept to a minimum. Generally, class rings, wedding bands, wristwatches, simple chain necklaces and earrings are the only acceptable jewelry. Visible body piercings including nose, lip, tongue and eyebrow are not acceptable. No earring can be larger than that of a nickel. Skin alterations are not permitted.

We reserve the right to send a group volunteer home for any infractions of the Rhino grooming standards.

GROUP CONTACT FORM

Thank you for your interest in volunteering with Rhino Sports and Entertainment Services. Before you can volunteer, we'd like to get to know more about your organization.

ORGANIZATION NAME:

NUMBER OF VOLUNTEERS:

PLEASE GIVE A BRIEF DESCRIPTION OF YOUR ORGANIZATION:

ORGANIZATION'S MAILING ADDRESS

This is the address in which Rhino will mail your organization's donation.

STREET ADDRESS

CITY/TOWN

STATE

ZIP

PRIMARY GROUP CONTACT

Your group's primary contact will be the individual in which Rhino contacts with information and updates regarding volunteer opportunities.

CONTACT NAME:

EMAIL:

PHONE:

PREFERRED METHOD OF COMMUNICATION:

EMAIL PHONE CALL TEXT MESSAGE

FORM EXPLANATIONS

What is a W-9 and why do we need one?

A Form 1099-MISC is generally used to report any payments made to a service provider or contractor. This helps the IRS track how much they can expect in taxes from contractors and those who are self-employed. Because you are technically a 'business-of-one' when contracting, independent contractors must handle their own taxes whereas companies automatically withhold for taxes with their traditional, W-2 employees. Meaning, they are not one of our own paid employees, so they are considered a vendor/contractor. A W9 needs to be provided before first payment is received in the event that they will make over \$600 in a calendar year. \$600 is the threshold amount to receive a 1099-MISC in January of the following year, any amount earned less than that will not yield a 1099-MISC.

Who fills out the W-9?

All participating groups need to complete a W-9 for their organization/group and not as an individual. If your group is unsure of your TIN, you will need to contact a representative from your organization.

What is Certificate of Liability Insurance?

A Certificate of Liability Insurance is a document issued by an insurance company/broker that is used to verify the existence of insurance coverage under specific conditions granted to the listed individual/organization. The document details the policy's effective date, the type of insurance coverage purchased, and the types and dollar amount of applicable liability.

Who provides the Certificate of Liability Insurance?

The main chapter of the group volunteering, for example if it is a church volunteer group, the church provide the certificate (if they have one), same goes for a school.

LIABILITY INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/01/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER SAMPLE	CONTACT NAME	
	PHONE (A/C, H/O, B/E)	FAX
	E-MAIL	
	ADDRESS	
	PRODUCER LICENSE #	
	INSURER(S) AFFORDING COVERAGE	
		POLICY #
INSURED SAMPLE	INSURER A :	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	

COVERAGE: CERTIFICATE NUMBER: 10047 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

FORM NO.	TYPE OF INSURANCE	ADD. SUB.	EXP. DATE	POLICY NUMBER	POLICY EFF. DATE	POLICY EXPI. DATE	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X			03/31/18	03/31/20	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES \$ 100,000 MED. EXP (Per one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
C	AUTOMOBILE LIABILITY ANY/AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	UMBRELLA LMB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LMB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$				03/31/18	03/31/20	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY BY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER/SCOUTMASTER (Maximum 10%) (Rate, amount used description of operations below)						E.L. EACH ACCIDENT \$ E.L. DISEASE SA EMPLOYEE \$ E.L. DISEASE POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER SAMPLE Attention:	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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****This is only an example****
 Please provide a certificate of liability insurance for your group if you have it.
 We suggest each group have their own liability insurance but is not required.

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Jane Brooke Doe

2 Business name/disregarded entity name, if different from above
University of North Carolina - Pembroke

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
 Other (see instructions) ▶ Educational Agency
 C Corporation
 S Corporation
 Partnership
 Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
 (Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
1 University Drive

6 City, state, and ZIP code
Pembroke, NC 28372

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

			-						
--	--	--	---	--	--	--	--	--	--

or

Employer identification number

17	-	7778880
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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ Jane Brooke Doe Date ▶ 4/18/18

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

****This is only an example****

Each group MUST complete a W-9 prior to working your first event.