

Community Fundraising Event Registration Form

Thank you for your signing up to fundraise for the Rick Hansen Foundation! All dollars raised from your fundraising event will help improve the lives of people with disabilities and remove physical barriers in the places where we work, live, learn and play – thank you!

The Rick Hansen Foundation team needs to review and approve your community fundraising event before you start planning the event itself. To make sure we fully understand your event and how we can help, please complete this form and send it by email or mail to the addresses listed below. When your application is officially approved, the event organizer will receive a signed copy of this form and can go ahead with event planning. Thank you!

You can send this form via:

Email: donorservices@rickhansen.com

Mail: **Rick Hansen Foundation**

ATTN: Community Giving Team

300-3820 Cessna Drive, Richmond, BC V7B 0A2

Contact Information

Name of Organization (if applicable):

Please select the category that best describes you:

Corporation School Community Service Club Individual

Other

Name and role of primary contact person:

Address:

City:

Province:

Postal Code:

Phone (home/cell):

 - -

Phone (business):

 - -

Email:

Event Information

Event Name:

Purpose of Event:

Type of Event:

One-time Annual On-going

Event Date(s):

Event Location:

Anticipated number of participants/attendees:

**Please note: Expenses should not exceed 20% of funds raised (e.g. for every dollar you raise, roughly twentycents or under is appropriate to spend). The Rick Hansen Foundation cannot accept any responsibility for any event costs.*

Target Market:

Family/Friends Members Customers General Public

Please describe your event:

What motivated you to hold this event? (e.g. connection to someone with a disability)

Financial Information

How will you raise the funds? (i.e. ticket sales, silent auction, etc.)

What price will you charge for each activity? (i.e., cost for tickets)

Please provide us with your best estimates of the following general budget information:

- A. Total Expected Income (donations, auction, ticket sales, food & beverage sales, etc.): \$
- B. Expenses (include costs such as advertising, food, entertainment, rentals, etc.) \$
- C. Anticipated Net Donation to RHF: (A - B = C) \$

Date contribution to Rick Hansen Foundation is expected:

Would you like donation receipts issued for your fundraising activity? Yes No

Will you be engaging in any gaming activities? If so, please provide your provincial government's gaming permit number:

Raffle 50/50 Draws Bingo Other:

Will you be securing sponsors for your event? Yes No

If so, please list the sponsors (prospective/confirmed):

Event Promotion

How will you promote your event? (local media, Facebook, Twitter, blog, website, etc.)

Would you like RHF to promote your fundraising event on RHF social media?

Rick Hansen Foundation Event Policies

The policies below are intended to protect the reputation and integrity of the Rick Hansen Foundation's name, personnel and affiliated programs. As part of your commitment to organizing an event, we ask that you and all those involved in organizing your fundraising activity review, acknowledge and abide by these policies.

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1. All events must be approved by the Rick Hansen Foundation prior to the event start date and prior to any event fundraising activities. The event cannot be promoted as a fundraiser for the Foundation until the event is approved and registered.
 2. Media press releases and marketing and promotion materials must be submitted to the Rick Hansen Foundation for review and approval prior to implementing.
 3. Rick Hansen Foundation logos are registered trademarks - unauthorized use is prohibited. All materials bearing the Rick Hansen Foundation name/logo and/or "in support of" logo must be submitted to the Foundation office for approval prior to printing and distribution.
 - a. The Rick Hansen Foundation reserves, at any time, the right to withdraw the use of its name.
 - b. The event organizer will maintain the highest standards when using the Foundation logos and templates referring to the Graphic Standards Manual for appropriate logo usage. This manual will be provided upon approval of your event.
 - c. All event materials that include a solicitation must be approved by the Community Giving team at the Rick Hansen Foundation. The solicitation must clearly disclose the purpose for which the funds are being raised, and include the Rick Hansen Foundation's name and contact information (mailing address, email, and web site). In addition, please ensure that our charitable registration number (107659427-RR-0001) is included on all event materials.

4. All costs associated with the event shall be the sole responsibility of the event organizer(s). The Rick Hansen Foundation cannot accept any responsibility for any associated costs and encourages the organizers to seek donated goods and services to offset any costs incurred. Costs should not exceed 20% of funds raised (e.g. for every dollar you raise, roughly twenty cents or under is appropriate to spend).
5. All volunteers for the event will be provided by the event organizer. The event organizer and any other event volunteers must identify themselves as volunteers and must not represent themselves as staff members of the Rick Hansen Foundation.
6. The event organizer will indemnify and save harmless the Rick Hansen Foundation and its servants, agents, employees, officers and directors from and against all claims, suits and causes of action arising out of the fundraising event.
7. The event organizer and any volunteers shall:
 - a. Act with fairness, integrity, and in accordance with all applicable laws.
 - b. Adhere to the provisions of applicable professional codes of ethics, standards of practice, etc.
 - c. Cease solicitation of a prospective donor who identifies the solicitation a harassment or undue pressure, or who states that he does not wish to be solicited.
 - d. Disclose immediately to the charity any actual or apparent conflict of interest or loyalty.
 - e. Not accept donations for purposes that are inconsistent with the charity's objects or mission.
8. The event organizer will acquire appropriate permits, licenses and insurance certificates. By accepting the terms and conditions set forth in this application, the event organizer clearly understands that they are accepting responsibility for claims that may arise as a result of their event.
9. Fundraising events will maintain the highest ethical standards. Each event will be well supervised, with proper safety procedures in place, to ensure the safety and well-being of all participants.
10. For confidentiality and protection of privacy, the Rick Hansen Foundation will not provide mailing lists or other donor information to the event organizer.
11. After the event, event organizers will not retain any private donor information, including name, address, telephone number, donation amount, and payment information. Please send all records to the Rick Hansen Foundation.
12. Should the fundraiser be cancelled, the organizer will notify the Rick Hansen Foundation prior to the planned event day.

I have read and agree to the Rick Hansen Foundation's Event Policies and understand that I must inform the Foundation of any changes made to my event.

SIGNATURE:

Event Organizer/Applicant

DATE:

SIGNATURE:

Rick Hansen Foundation

DATE:

Questions?

If you have questions or need additional information, please contact us at:

Call Toll Free via 1-800-213-2131 (press 3) or email donorservices@rickhansen.com

Thank you!

Community Giving team

Rick Hansen Foundation

RHF EVENT DONATION TRACKING FORM

*If you believe in a dream and have the courage to try,
anything is possible. —Rick Hansen*



EVENT NAME _____

Forms should be received within 14 days of your event.

Please do not mail cash. Send us a cheque for the total amount that is payable to the Rick Hansen Foundation.

PARTICIPANT INFO

Name _____

Address _____

City _____ Postal Code _____

Phone _____

Email _____

TOTALS

Amount cash _____

Amount cheque _____

Amount credit card _____

TOTAL _____

Name <small>PLEASE PRINT CLEARLY</small>	Address <small>PLEASE PRINT CLEARLY</small>	Amount	Card # _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _
Phone	City, Prov	Postal Code	Expiry Date _ _ / _ _ <input type="radio"/> Visa <input type="radio"/> MC <input type="radio"/> AMEX <input type="radio"/> Cash <input type="radio"/> Cheque
Company Name (if corporate gift)	Email		<input type="radio"/> For gifts under \$20, select to receive a donation receipt
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Company Name (if corporate gift)	Email		<input type="radio"/> For gifts under \$20, select to receive a donation receipt

To receive a donation receipt, please write your First Name, Last Name and complete mailing address (Unit Number, Street Address, City, Postal Code, etc.).

THANK YOU FOR YOUR SUPPORT!
Charitable Registration # 10765 9427-RR-0001