

Third Party Fundraising Agreement

CONTACT INFORMATION

Name of the individual / group / company planning the fundraiser:		
Contact Name:		
Address:		
City:	Province:	Postal Code:
Website:	Tel (Business):	Tel (Cell):
Facebook:	Instagram:	Twitter:
E-Mail:		

EVENT INFORMATION (if applicable)

Event Name:	Event Date:	
Event Location & Address:		
City:	Province:	Postal Code:
Briefly describe the event:		
How many people do you expect to attend the event?		

Proposed Budget (if applicable)

Please provide estimates for the following revenue and expenses. Note that all event costs must either come out of the event proceeds or be paid directly by the event organizer.

Revenue		Expenses	
Tickets Sales	\$	Venue Rental	\$
Sponsorship	\$	Food	\$
Donations	\$	Printing	\$
On-site Fundraising	\$	Advertising	\$
		Other	\$
TOTAL REVENUE	\$	TOTAL EXPENSES	\$
Total expected revenue for Stevenson Memorial Hospital Foundation (TOTAL REVENUE – TOTAL EXPENSES)			\$



How do you plan on promoting your event?

* Please note that all materials must be pre-approved by Stevenson Memorial Hospital Foundation

Empty text box for promoting your event.

Where would you like the funds raised designated to be within Stevenson Memorial Hospital Foundation?

<input type="checkbox"/>	Because of YOU campaign
<input type="checkbox"/>	Area of Interest: _____

Please list any other charitable organizations that will also benefit from this event:

Empty text box for other charitable organizations.

Stevenson Memorial Hospital Foundation Support

Stevenson Memorial Hospital Foundation can provide support to your event in a variety of ways. While every effort will be made to support your event, this request does not guarantee we will be able to provide the requested resources. Please check below the ways you would like our support:

<input type="checkbox"/>	Stevenson Memorial Hospital Foundation staff make efforts to help recruitment volunteers. These volunteers would be considered volunteers of the event and would need to be covered under your third-party insurance.
<input type="checkbox"/>	Use of online fundraising platform. <i>Please note that 100% of donations made online will go towards the specific area that you are supporting. Stevenson Memorial Hospital Foundation cannot return any of these funds to the event organizer for event expenses.</i>
<input type="checkbox"/>	Use of any of the following promotional materials: Retractable Banner ___ Handouts ___ Feather Flag ___
<input type="checkbox"/>	Stevenson Memorial Hospital Foundation will make efforts to provide a representative to speak at your event when requested. <i>Guest attendees from Stevenson Memorial Hospital Foundation will receive complimentary tickets or admission when invited to speak or attend an event.</i>
<input type="checkbox"/>	We can promote your event on our social media accounts. Please select which of the following platforms you would like us to use to showcase your event: Facebook ___ X ___ Instagram ___ LinkedIn ___ Please provide your handles for each platform for us to re-post your promotional posts related to the event: Facebook: _____ Instagram: _____ X: _____ LinkedIn: _____



Stevenson Memorial Hospital Foundation Support

Stevenson Memorial Hospital Foundation acknowledges that each Third Party Fundraiser is unique, please include any additional support requests below:

Please read the following and sign below to verify that you have read and agree to the following terms and conditions:

- Proceeds from this event will be directed to Stevenson Memorial Hospital Foundation **Because of YOU** campaign unless other arrangements are agreed to between the organizer and Stevenson Memorial Hospital Foundation.
- Net proceeds from this event together with all related financial reports, with a straightforward accounting of revenue and expenses, will be remitted to Stevenson Memorial Hospital Foundation within **30 days** of this event. Stevenson Memorial Hospital Foundation retains the right to verify the financial reports.
- Tax receipts will be issued according to Canada Revenue Agency guidelines.
- Stevenson Memorial Hospital Foundation assumes no legal or financial liability associated with this event.
- Stevenson Memorial Hospital Foundation is not responsible for any accidents or damage to persons or property that may occur during the course of this event and the event organizer will ensure that suitable insurance is in place prior to staging this event.
- If Stevenson Memorial Hospital Foundation has serious concerns about the way this event is being implemented and such concerns are not immediately addressed, Stevenson Memorial Hospital Foundation reserves the right to withdraw the use of its name and logo and cancel this agreement. Stevenson Memorial Hospital Foundation is not responsible for financial or other damages that may result from such cancellation.
- Stevenson Memorial Hospital Foundation will not endorse or appear to endorse any one product or supplier.
- As a Third Party Fundraising host you will be required to submit proof of insurance, naming Stevenson Memorial Hospital Foundation as an Insured prior to your event.

Please consider the following marketing guidelines when designing your event materials:

- Stevenson Memorial Hospital Foundation staff will provide digital files of their logo and campaign brand identity for your marketing materials. To maintain visual integrity and brand standards, the "in support of" SMHF logo and the **Because of YOU** campaign brand identity must be used in their original proportions and colors. They should never be stretched, cropped, or color-swapped to match other materials.
- The placement of the "In Support of Stevenson Memorial Hospital Foundation" logo must be secondary to the sponsor's primary branding.
- Stevenson Memorial Hospital Foundation staff will review and approve in writing all marketing materials prior to your use. Please allow 2 to 3 business days for review and approval.
- For contributions of \$10,000 and higher Stevenson Memorial Hospital Foundation will allow the use of the "In Support of Stevenson Memorial Hospital Foundation" logo for one calendar year.
- When permissions allow the using the statement "In Support of Stevenson Memorial Hospital Foundation", it must always be used in full.
- There is no implied endorsement: Use of the logo does not mean SMHF endorses the event hosts specific products or services. Marketing copy should focus on the philanthropic impact (e.g., "Helping with the Stevenson Memorial Hospital Foundation's **Because Of YOU** campaign") rather than implying the recommendation of these products over others.



Event Organizer

Stevenson Memorial Hospital Foundation Staff

Name:		Name:	
Signature:		Signature:	
Date:		Date:	

THANK YOU! We are so appreciative of your hard work, time and effort!

Please complete, sign and return the event proposal form to Melody Craggs, Director of Development at mcraggs@smhosp.on.ca.