

COMMUNITY EVENT APPLICATION / AGREEMENT FORM

Hosting an event or fundraiser for JDRF is a great way to get you, your family, friends and colleagues involved in accelerating diabetes research. We are very grateful for your support and want to help you make your event memorable and successful.

ORGANIZER(S)

NAME OF ORGANIZING GROUP

CATEGORY (SCHOOL, COMPANY, INDIVIDUAL, COMMUNITY GROUP, OTHER)

PRIMARY CONTACT

EMAIL

ADDRESS

CITY/PROVINCE

POSTAL CODE

<input type="text"/>	<input type="text"/>
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TELEPHONE (HOME)

TELEPHONE (WORK)

<input type="text"/>	<input type="text"/>
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CELL

I give permission for JDRF to contact me, including by email, about its activities and how I can support its mission to accelerate T1D research. You can withdraw your consent at any time.

EVENT

NAME OF EVENT

DATE (DAY-MONTH-YEAR)

TIME

<input type="text"/>	<input type="text"/>
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LOCATION

ADDRESS

CITY/PROVINCE

POSTAL CODE

<input type="text"/>	<input type="text"/>
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RECURRING EVENT

DOES THIS EVENT OCCUR REGULARLY OR ARE YOU PLANNING ON HOLDING THIS EVENT AGAIN?

YES NO WHEN? _____

EVENT RENEWAL

HAVE YOU HELD THIS EVENT PREVIOUSLY?

YES NO WHEN? _____

TYPE OF EVENT

- | | |
|--|--|
| <input type="checkbox"/> BENEFIT DINNER OR LUNCH | <input type="checkbox"/> CONCERT |
| <input type="checkbox"/> SPORTING EVENT | <input type="checkbox"/> GOLF TOURNAMENT |
| <input type="checkbox"/> FASHION SHOW | <input type="checkbox"/> JDRF WALK SUPPORT |
| <input type="checkbox"/> OTHER (SPECIFY BELOW) | <input type="checkbox"/> JDRF RIDE SUPPORT |

ESTIMATED NUMBER OF PARTICIPANTS: _____

FUNDRAISING

WHAT TYPE OF FUNDRAISING ACTIVITIES WILL YOU DO?

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> SALE OF TICKETS OR GOODS | <input type="checkbox"/> AUCTION |
| <input type="checkbox"/> RAFFLE | <input type="checkbox"/> PERFORMANCE |
| <input type="checkbox"/> MATCHING GIFTS BY EMPLOYER | <input type="checkbox"/> OTHER _____ |
- OR SPONSOR

WHAT ARE YOUR ANTICIPATED REVENUE STREAMS

VENUE RENTAL	
FOOD AND DRINK	
PERMIT, LICENSE, OR OTHER AUTHORIZATION	
INSURANCE	
ADVERTISING AND PROMOTIONAL MATERIALS	
PRINTING (INVITATIONS, POSTERS, ETC.)	
AUDIOVISUALS	
SECURITY	
DOOR PRIZES	
DECORATION	
MISCELLANEOUS FEES	
<i>TOTAL ANTICIPATED EXPENSES</i>	

ANTICIPATED DONATION TO JDRF: _____

RECEIPTS

- Tax receipts required (if checked, we require a completed Third Party Financial Report before receipts can be issued. This is required as per CRA requirements.) Donations over \$20 will receive a tax receipt.
- Tax receipts not required

OTHER BENEFICIARIES OF THE FUNDRAISER

Will funds be allocated to any other organizations?

- YES
- NO

Please list the name of the organization(s) receiving proceeds from your fundraiser. If applicable, specify the percentage that will be donated to each.

PROMOTION

Please describe what steps will be taken to let people know about your event and raise funds.

EVENT SUPPORT

JDRF can provide support for your event. Please complete the check boxes below:

- JDRF Banner / Sign / Logo
- JDRF Information Brochures
- Speaker / Youth Ambassador
- Volunteers
- Cheque Presentation
- Recognition Opportunities
- Use of the JDRF online fundraising tools

COMMENTS

Please attach any additional relevant information to this form

NOTES

• JDRF reserves the right to refuse an event. For example, funds raised must respect the branding of JDRF and the policies and guidelines established by the Canada Revenue Agency and JDRF.

• Funds received by JDRF (on-line or otherwise) will be assigned to JDRF. They cannot be reclaimed by the event organizer to cover expenses

CONDITIONS

- I agree that all fundraising events for JDRF must be approved, even before the event is organized
- I agree to forward all funds raised within no more than 45 days after the event is held
- I agree that all communications (invitations, tickets, solicitation for sponsorships, advertisements, posters, etc.) featuring the name and logo of JDRF must be submitted for approval prior to distribution
- I am aware of the Canada Revenue Agency's policies and guidelines with regards to donations, and I agree to adhere to them
- I have reviewed JDRF's Community Event Frequently Asked Questions
- I agree to hold JDRF, its agents and employees harmless for any damages, financial obligations or liabilities that may be incurred by this event

SIGNATURE

DATE

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THANK YOU FOR SUPPORTING JDRF AND THE TYPE 1 DIABETES COMMUNITY

SUBMITTING YOUR FORM

This form can be sent by mail, fax, email or in person to:

JDRF Canada

235 Yorkland Blvd. Suite 600,

Toronto ON, M2J 4Y8

Toll-Free: 1-877-287-3533

Telephone: 647.789.2000

Fax: 416.491.2111

Email: general@jdrf.ca

FOR JDRF USE ONLY

APPROVED BY

SIGNATURE

DATE

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AGREEMENT NUMBER