



Cure Brain Cancer Foundation

Community Fundraiser/Activity Application Form

Please complete and sign this form, then send via post or email (details below)

Fundraiser Information

Name(s) of organiser:

Name of organisation (if applicable):

Address:

Suburb:

State:

Postcode:

Best Contact Number:

Home No:

Email:

Website (if applicable):

I confirm I am 18 years or older.

Yes

Have you raised funds previously for the benefit of Cure Brain Cancer?

Yes No

Do you plan to hold this fundraising activity on a yearly basis?

Yes No

I would like to receive updates on brain cancer research, events, and news.

Yes No

Would you like your event/activity featured in Cure Brain Cancer's newsletter?

Yes No

Would you like your event/activity featured on Cure Brain Cancer's website?

Yes No

What has inspired you to raise funds for Cure Brain Cancer?

Fundraising Details – How you plan to raise funds for Cure Brain Cancer Foundation

Name/nature of fundraiser/activity:

Proposed date/timeframe of your fundraiser/activity:

Address/venue of fundraiser/activity:

Estimated number attending (if an event):

How do you intend to promote your fundraiser/event?

Tell us briefly about your fundraiser/activity (how funds will be raised etc):

Budget Information

Will another organisation benefit from the fundraising in addition to Cure Brain Cancer? Yes No

If yes, please state which organisation:

What % of funds will be given to Cure Brain Cancer?

Estimated expenditure: \$

How much money do you hope to raise for Cure Brain Cancer? \$

Cure Brain Cancer Foundation Support

I would like to request the following support/assistance from Cure Brain Cancer Foundation (CBCF):

- Use of Cure Brain Cancer logo
- Cure Brain Cancer brochures QTY
- Vinyl banner with eyelets (2 m wide) - to be returned to CBCF post event
- Cure Brain Cancer 'About Us' video to be played at your event
- A Cure Brain Cancer representative to attend your event (dependent on availability)
- Tax-deductible receipts books for cash/cheque donations
- Other (please specify):

Merchandise to sell. Proceeds from the sale of merchandise are to be sent to Cure Brain Cancer with other donations/funds raised. Subject to availability.

- | | |
|---|--|
| <input type="checkbox"/> Cure Brain Cancer beanies (RRP \$20) QTY | <input type="checkbox"/> Cure Brain Cancer headphone beanie with microphone (RRP \$25) QTY |
| <input type="checkbox"/> Running caps (RRP \$15) QTY | <input type="checkbox"/> Lapel ribbons QTY |
| <input type="checkbox"/> Water bottle (RRP \$25) QTY | <input type="checkbox"/> Silicon purple wristbands QTY |
| <input type="checkbox"/> Tie dye hyper tubes (RRP \$10) QTY | <input type="checkbox"/> Crane Tattoos QTY |
| <input type="checkbox"/> Donation box QTY | |

Please note that we will contact you to discuss your requirements further. Support/assistance is subject to availability.

Social Media and Website

If you would like Cure Brain Cancer to help promote your event on our website and social media channels, please write a brief description below outlining your event (150 words or less):

Public Liability Insurance Information

Cure Brain Cancer Foundation offers our Community Fundraisers the option of being covered under our public liability insurance policy for events under 500 participants.

If you would like further information on our public liability insurance please tick the box YES, I would like more information

Disclaimer and Fundraising Agreement

Cure Brain Cancer Foundation reserves its rights to withdraw approval for the fundraiser/activity at any time if it appears that there is a likelihood of the Fundraiser failing to adhere to any of the above terms and conditions, and/or Community Fundraising Guidelines.

In consideration of my application being accepted, I understand, intending to be legally bound for myself and my heirs, executor and administrators, waive and release the organisers and sponsors (individually and collectively), including the directors, officers, staff, volunteers and representatives thereof, and indemnify them against any liability (including liability for negligence) for the death or any physical or mental illness, incapacity of property damage or loss, which I may suffer which may directly or indirectly result from my participation in the fundraiser/activity. I further verify that I am in appropriate physical and mental condition to participate in the fundraiser and acknowledge that I am aware of the risks involved and voluntarily agree to assume those risks.

1. I _____ (Event Organiser's name) accept the above conditions of the Disclaimer and Fundraising Agreement.
2. I agree to conduct my Fundraiser/activity _____ (nature/name of fundraiser/activity) in accordance with this agreement and in a manner which upholds the integrity, professionalism and values of the Cure Brain Cancer Foundation.
3. I have read and I agree to abide by the fundraising guidelines of the Cure Brain Cancer Foundation and indemnify the Cure Brain Cancer Foundation from and against any claims for injuries or damage arising at or from the fundraiser/activity that is the subject of this application.

Signature: _____ Name (please print): _____

Date: ___/___/___

Thank you very much for taking the time to complete this form.

We suggest you scan/photocopy this signed agreement and keep a copy for yourself and return via:

Email: events@curebraincancer.org.au

Mail: Cure Brain Cancer Foundation
PO Box 392
Surry Hills NSW 2010

Fax: 02 9332 1008

If you have any questions please call us on 02 9550 5244.

Thank you for your support of Cure Brain Cancer Foundation. Together we will succeed.