



Third Party Event Application Form

Thank you for your interest in raising funds for the Victoria Women's Transition House. We welcome and appreciate your efforts to raise awareness and to support women and children who have been impacted by abuse right here in your community.

The use of the Victoria Women's Transition House Society name, or the name of any charity, implies that funds will go to that organization.

As Development staff, we have a responsibility to steward these funds and a responsibility to our Donors to ensure these events will indeed raise funds for the Society and that our name and/or logo will be associated with events that keep with our mission, values, and vision.

Therefore we must formally approve of any Third Party Fundraising Events and activities using our name.

We look forward to learning more about your event and ask you to please read through our guidelines and complete the following:

1. Third Party Event Terms and Conditions
2. Third Party Event Proposal Form

Once these are complete, please contact Elissa Bergman at 592-2927 or elissab@vwth.bc.ca to arrange a face to face meeting to discuss the event details in person.

THIRD PARTY EVENTS – TERMS AND CONDITIONS

Please read the following terms and conditions, complete the required information, And sign below.

1. I _____, (Organizer), am applying to organize a Third Party Fundraising Event to benefit the Victoria Women's Transition House (VWTH). The VWTH does not take an active role in planning or organizing this event.
2. Only events consistent with the vision and mission of the VWTH will be approved.
3. Use of the VWTH name should be done with one of the following wordings:
 - "Proceeds from this event will go to the Victoria Women's Transition House"
 - "Your ticket purchase helps to support the Victoria Women's Transition House"
 - "The (name of your event) is a benefit for the Victoria Women's Transition House"
4. The organizer agrees to submit to the Victoria Women's Transition House all copy for advertisements and other event-related promotional materials which use the name and/or logo of the Victoria Women's Transition House; and to obtain VWTH's written permission before their production and distribution. The Transition house expressly reserves the right to final approval on anything that uses the name of the Victoria Women's Transition House.
5. The sponsoring organization/individual agrees to underwrite all costs of the special event/promotional campaign, or to secure such underwriting. The Victoria Women's Transition House shall incur no costs or liabilities unless otherwise agreed to in writing prior to the special event/promotional campaign.
6. The Organizer agrees to handle all monetary transactions for the event and will present the proceeds to VWTH within 60 days along with detailed accounting.
7. The Organizer acknowledges that VWTH adheres to receipting policies of the Canada Customs and Revenue Agency. Please note that not all funds raised qualify for a tax receipt. The Canada Revenue Agency restricts the dollar amount of tax receipts to donors where a benefit or advantage accrues to the supporter. Examples include but are not limited to door prizes, dinner, signage/advertising, complimentary items. The Organizer agrees not to promise charitable tax receipts for any donation, item or service without first speaking to the Development Office of the VWTH.
8. The Organizer agrees to receive advance written approval from VWTH before requesting any donations/sponsorships (cash or in Kind) from any organization or individual.
9. The VWTH accepts no legal responsibility for the event and cannot be held liable for any risk or injury, or other damages in conjunction with the event. The organizer must obtain all necessary permits, license, and insurance relating to the event and will provide the VWTH with copies of the above at least 2 weeks before the event start date.

10. The organizer will arrange staff/volunteers to organize and run the fundraiser. This is an opportunity for you and your group to raise funds in support of women and children right here in your community. The VWTH may be able to provide some level of assistance for events depending on timing and staffing requirements.
11. The organizer agrees to use its own mailing list and or contacts. The VWTH will not actively sell tickets to the event and/or purchase tickets for attendance for VWTH representatives. The Organizer is asked to give the VWTH two complimentary tickets for use by staff and/or board.
12. Approval of the Organizers application is only valid for the event detailed in this proposal. Events held in subsequent years and/or of a different format must also be submitted for approval.

The Victoria Women's Transition house reserves the right at any time to withdraw its support of the Event and the use of the VWTH's name and logo. If the event is cancelled, the Organizer will notify VWTH within three business days.

I agree to the terms and conditions as outlined above:

Organizer's Name and Title: (Print)

Signature

Date

Approved when signed: _____

(Print name) for the Victoria Women's Transition House

Date

THIRD-PARTY EVENT PROPOSAL FORM

Please complete this form in full

PLEASE PROVIDE SOME BACKGROUND DETAILS:

Date of Request: _____

Project/Event Title (if applicable): _____

Location: _____

Event Date: _____

APPLICANT OR LEAD ORGANIZATION INFORMATION:

Name of Individual/ Organization/Group

When was your organization established? What is your purpose? Do you have a connection to VWTH?

Mailing Address: _____

Telephone: _____ Fax: _____

Email: _____ WEBSITE: _____

Contact Person (name & position title): _____

How will you publicize/promote your fundraiser? Will the publicity be handled by an agency? If so, please provide the contact information. _____

Posters/flyers Newspaper Ads Website Radio Other

Will there be printed materials produced in conjunction with this event? Yes No

Do you intend to use the VWTH logo or our name on your advertising? Yes No

How will the VWTH logo be used? _____

**** Please note all materials to contain the VWTH logo must be approved by VWTH prior to production. The Logo and name cannot be used without permission.***

PLEASE TELL US WHAT YOU ARE EXPECTING FROM VWTH?

Tour of our facilities/ visit from staff member to your operation? _____

Do you foresee the use of VWTH materials? Yes No

If **yes**, please provide details:

Print materials will be required Estimated #: _____

A representative from VWTH is requested to: _____

Other: _____

Note – we may or may not be able to provide a representative at your event

Please provide a description of your event:

(Including logistics, venue, numbers of attendees, costs, etc. – use additional space if nec.)

PLEASE PROVIDE US WITH SOME FINANCIAL INFORMATION:

Will other Charitable organizations benefit from this fundraiser? ____ Yes ____ No

If yes, please list the name (s): _____

Will you require tax receipts? ____ Yes ____ No

Please note tax receipts are issued in accordance with CRA guidelines and must be pre-approved by VWTH.

We suggest that you take some time to plan your event's revenues and expenses. Please fill out the following to the best of your ability.

Revenues:

Expenditures:

Cash Sponsorships:	Venue:
Ticket Sales:	Food/ Beverage
Auction:	Printing/Advertising
Misc Sales	Entertainment:
Other (specify):	Décor
	Other (specify):
Totals	Totals

Expected Net Revenue: (Rev – Exp) = _____

Amount to be given to VWTH: _____

References:

Please list at least one reference (professional contact or previous fundraising recipient organization and contact) below that VWTH can contact if this is your first time conducting a fundraiser in support of VWTH.

Organization Name:

Contact Person:

Telephone:

Relationship:

Title:

Email:

Please complete this form and return with necessary attachments (budget, additional Information) by mail, e-mail or fax to:

Victoria Women's Transition House
100 – 3060 Cedar Hill Road
Victoria, BC
E: elissab@vwth.bc.ca
T: 250-592-2927
Fax: 250-592-2995

**** Please allow at least 10-12 business days for final approval of your proposal****

For internal VWTH use only

Date received: _____

Date reviewed: _____ Reviewed by: _____

Approved Declined

Notes: _____
