



## THIRD PARTY EVENT APPLICATION

*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 you have completed these forms, please contact Penny Dunlop (250-592-2927 ext 213), or pennyd@vwth.bc.ca) to arrange a face to face meeting to discuss the event details in person.***



## THIRD PARTY EVENT: TERMS AND CONDITIONS

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

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1. I, \_\_\_\_\_  
(Organizer), am applying to organize a Third Party Fundraising Event to benefit the Victoria Women's Transition House Society (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 in the following manner:
  - "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. The Organizer acknowledges the 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.
7. The Organizer agrees to receive advance written approval from VWTH before requesting any donations/sponsorships (cash or in Kind) from any organization or individual.
8. **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.**

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 detail in this proposal. Events held in subsequent years and/or are 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:**

<b>Organizer's Name (please print)</b>	<b>Organizer's Title</b>
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<b>Signature</b>	<b>Date</b>
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**Approved by the Victoria Women's Transition House Society:**

<b>For the Victoria Women's Transition House Society (please print name)</b>	<b>Title</b>
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<b>Approval Signature</b>	<b>Date</b>
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## THIRD PARTY EVENT: PROPOSAL

Please complete this form in full.

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Request Date: \_\_\_\_\_ Event Date: \_\_\_\_\_

Project/Event Title: \_\_\_\_\_

### Applicant or lead organization information:

\_\_\_\_\_  
Name—Individual/Organization/Group

Ms.  Mrs.  Mr.   
Miss  Dr.

\_\_\_\_\_  
Contact First Name                      Contact Last Name

\_\_\_\_\_  
Contact's Title

\_\_\_\_\_  
Mailing Address:

\_\_\_\_\_  
Unit                      Street Address                      City                      Province                      Postal Code

\_\_\_\_\_  
Phone                      Email

\_\_\_\_\_  
Fax                      Website

\_\_\_\_\_  
When was your organization established?

\_\_\_\_\_  
What is your purpose?

\_\_\_\_\_  
What is your connection with VWTH?

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**Event information:**

Event Date: \_\_\_\_\_

Project/Event Title: \_\_\_\_\_

Event Location: \_\_\_\_\_ Event Venue \_\_\_\_\_

Attendee number: \_\_\_\_\_

Event description and logistics:  
\_\_\_\_\_  
\_\_\_\_\_

**Event financial information:**

Will other charitable organizations benefit from this fundraiser?  Yes  No

If yes, please list the other charitable organizations:  
\_\_\_\_\_  
\_\_\_\_\_

Will you require tax receipts?  Yes  No

**PLEASE NOTE: Tax receipts MUST be issued in accordance with Canada Revenue Agency guidelines and MUST be pre-approved by VWTH.**

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

<b>Revenues:</b>		<b>Expenditures:</b>	
Cash Sponsorships:	\$ _____	Venue:	\$ _____
Ticket Sales:	\$ _____	Food/Beverage:	\$ _____
Auction:	\$ _____	Printing/Advertising:	\$ _____
Miscellaneous sales:	\$ _____	Entertainment:	\$ _____
Other (specify):	\$ _____	Décor:	\$ _____
	\$ _____	Other (specify):	\$ _____
	\$ _____		\$ _____
<b>Total:</b>	<b>\$ _____</b>	<b>Total:</b>	<b>\$ _____</b>

**Expected Net Revenue** (Revenues – Expenditures): \$ \_\_\_\_\_

**Amount to be given to VWTH:** \$ \_\_\_\_\_

## Publicity Information

How will you publicize/promote your fundraiser?

Posters/Flyers     Newspaper Ads     Website     Radio     Other

Are you producing printed materials for this event?

Yes     No

Do you intend to use the VWTH logo or name on your advertising?

Yes     No

How will you use the VWTH logo? **Please attach a sample and describe below:**

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**All materials containing the VWTH logo and name must be approved by VWTH before production. You may not use our logo and name without permission.**

Will an agency handle the publicity?

Yes     No

If yes, please provide the agency's contact information:

Agency Name

Mailing Address:

Unit

Street Address

City

Province

Postal Code

Phone

Email

## Please tell us what you expect from VWTH:

**PLEASE NOTE: We may or may not be able to provide a representative at your event.**

A tour of our facilities?

Yes     No

A visit from a staff member to your organization?

Yes     No

Resources? Please provide details:

Print materials:

Yes     No

Estimated quantity: \_\_\_\_\_

We request that a VWTH representative:

Other:

## References:

If this is your first time conducting a fundraiser to support VWTH, please list at least one reference (professional contact, or previous fundraising recipient organization and contact) who VWTH can contact.

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**Organization Name** \_\_\_\_\_

Ms.  Mrs.  Mr.   
Miss  Dr.

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**Contact First Name** \_\_\_\_\_ **Contact Last Name** \_\_\_\_\_

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**Contact's Title** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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**Unit** \_\_\_\_\_ **Street Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Province** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

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**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

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**Fax** \_\_\_\_\_ **Website** \_\_\_\_\_

Relationship: \_\_\_\_\_

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**Please return this completed form with necessary attachments (budget, additional information by mail, email or fax to:**

Victoria Women's Transition House Society  
100-3060 Cedar Hill Road  
Victoria BC V8T 3J5

E: pennyd@vwth.bc.ca  
F: 250-592-2995

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

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## VWTH internal use only:

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approved  Declined Reviewed by: \_\_\_\_\_

Notes: \_\_\_\_\_

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