



Partners in Caring Event Proposal Form

Name of group/company:		Once Completed Please Send To: RVH Foundation 201 Georgian Drive Barrie, Ontario L4M 6M2 Phone: (705) 739-5600 Fax: (705) 792-3324
Contact name:		
Title:		
Address:		
City: Barrie	Postal Code:	
Tel:	Bus:	Fax:

Email:

Web Address:

Event Information:

Name of Event:

Date(s):	Time(s):
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Event Location(s) and Address(es):

Briefly describe the event:

What has inspired you to hold this event?

Would you like your event listed on our website? Yes No

If Yes, please write how you would like it to be listed. If more space is required, please attach a separate page.

Proposed Budget: Please list all revenue and expenses and indicate what you expect to be donated.

How would you like your gift designated:
 Area of greatest need RVH Expansion & Simcoe-Muskoka Regional Cancer Centre Other _____

Revenue		Expenses	
Sponsorships	\$	Venue Rental	\$
Registration Fees	\$	Food	\$
Ticket Sales	\$	Beverage	\$
Cash Donations	\$	Printing	\$
Ancillary Fundraising (ie. silent auction)	\$	Security	\$
		License Fees	\$
		Prizes	\$
		Other (Please Specify)	\$
			\$
Total Revenue	\$	Total Expenses	\$
		Total Profit	\$



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Tax Receipts:

Do you require tax receipts? Yes No

If yes, what for? Please check all that apply.

- Regular donation (no advantage)
- Event Tickets/Entrance Fee
- Gift In Kind Donation
- Art work/Wine

For RVH Foundation Use Only:

Ticket/Entrance Fee
Ticket price/Entrance Fee \$ _____

Gift in Kind Donation Form /
Art work/Wine Donation Form
Supplied on date: _____

FMV of service received \$ _____

Value of any products/gifts received (per person) \$ _____

Value of any Door prizes \$ _____

Approved for Receipts Yes No

Receipt eligible at value of \$ _____

Rules and Regulations:

- I(we) understand that I(we) will be acting on behalf of the RVH Foundation and may receive private and confidential information including gift amounts and banking information from individuals who donate to the event. As such, I(we), the event host(s):
 - will not maintain personal information for private, or business use
 - will not disclose any personal information (donation amounts, banking information etc.) to anyone other than the Foundation representatives
 - will not alter any information received from event participants
- I(we) will adhere to all tax receipting rules and regulations. I(we) understand that tax receipts may be offered if approved prior to the event date and I(we) are responsible to provide the RVH Foundation with a full accounting for donations as required by Canada Revenue Agency.
- All proceeds from event will be returned to the foundation office within 60 days from event date or prior to December 31 (whichever is soonest.)
- All use of the RVH logo will be approved prior to release.
- I(we) will obtain all necessary permits and licenses and insurance for the event.
- The Foundation reserves the right to withdraw permission to use name and logo at any time without assuming responsibility for costs and expenses.
- Should an event be cancelled I(we) will inform the Foundation at least 1 day prior to event date.
- The Foundation will not assume any financial or legal liability
- The Foundation is not held liable for damages or accidents to people or property

I (we) fully understand and agree to comply with the rules and regulations for the Partners in Caring Program. I (we) understand that should I(we) breach the above stated contract, RVH will no longer endorse events I(we) are involved in planning and may result in criminal prosecution.

Name(s): _____

Date(s): _____