



dedicated to finding a cure

EXTERNAL FUNDRAISING EVENT PROPOSAL & NOTIFICATION FORM

The Juvenile Diabetes Research Foundation greatly appreciates your efforts to support our cause through fundraising. In order to comply with legal obligations, the JDRF is required to keep a register of all fundraising events. As part of your event planning, please complete this form and return to **Michelle Paule, Juvenile Diabetes Research Foundation, PO Box 2038, South Melbourne, Vic 3205 or Fax 03 9696 3159.**

YOUR DETAILS

Name: _____ OFFICE USE ONLY

Company / Organisation / School (if applicable): _____

Street Address: _____ Postcode: _____

Phone: () _____ Mobile: _____ Facsimile: _____

E-mail: _____

EVENT DETAILS

Name of event _____

Description of fundraising event/activity _____

Event location: _____ Date: _____

I agree this event will result in a donation of _____ % of net profits (state percentage).

Please state other beneficiaries from this event (if any) _____

Amount estimated to be donated to JDRF \$_____ Number of people anticipated to attend: _____

I have read and agree to comply with any legal requirements of fundraising and of the JDRF's conditions for fundraising as advised in 'Conducting a Fundraising Event for the JDRF' and 'Important Information about Tax Deductible Donations'.

Signed _____ Date: _____

Note: JDRF will investigate any person who is alleged to be using its name to deceive the public to make personal profit or using its name in an unauthorised manner. JDRF reserves the right to refuse permission to fundraise on its behalf.

EVENT APPROVAL: This authority to fundraise applies only to the event described on this form.

Signed and approved on behalf of the Juvenile Diabetes Research Foundation of Australia Ltd:

Signature _____ (JDRF Staff) Date _____

Please send your donation / money raised to JDRF, PO Box 2038, South Melbourne VIC 3205. Please make cheques / money orders payable to Juvenile Diabetes Research Foundation. **Please forward donations to the Foundation within 4 weeks of the date of your event.** Phone enquiries can be made to 03 9696 3866 ext 201.

Please forward this slip along with your donation / money raised to Juvenile Diabetes Research Foundation, PO Box 2038, South Melbourne VIC 3205 or fax 03 9696 3159.

Name: _____ Organisation: _____

Amount donated: _____ Form of payment (Please circle): Cheque, Money Order, Credit Card.

Card Type: _____ Card Number: _____ / _____ / _____ Exp Date: ____ / ____

Event Number: _____