Fundraising Proposal & Agreement

Name of group/organisation/company
_____

_____

Address _____

_____

Postcode _____

Name of event manager or person/persons organizing the event
_____

_____

Phone _____

Mobile _____

Fax _____

Email _____

Website (if applicable) _____

Type of organisation

Club Company Sole Trader Association Partnership Other
_____

Director or Partner Details (If applicable)

Name
_____

_____

Address
_____

Phone _____ Mobile _____

Fax _____

Have you ever raised funds for CARI before? Yes No

Select the type of Fundraiser Event you would like to undertake
Raffle, Work/School Charity Day
BBQ/Luncheon, Art/Craft Exhibition/Sale
Dinner & Auction, Golf Day
Entertainment/Music, Sports Day
Family Fun Day, Fashion Parade
Fun Run
Trivia Night
Head Shave Fete
Other _____

Fundraising Event name
_____

Proposed Date/Time
_____

Address (Venue)
_____

How do you plan to advertise your Fundraising Event?
_____

I accept the terms of the CARI Fundraising Standards (available on website under http://www.cari.ie/help-us/overview . I agree to conduct my Fundraising Event in accordance with those terms and conditions and in a manner that upholds the integrity of CARI.
I have read and I agree to abide by the Terms and Conditions of Fundraising for CARI Appeal and indemnify CARI from and against all claims, liabilities, losses, damages, costs and expenses arising from any claim, suit or action arising whether directly or indirectly from or in connection with the Fundraiser Event that is the subject of this application.
Print name
_____

Signature _____ Date _____Authorised signatory for and on behalf of Fundraiser

To download and save a form for e-mailing, please go to http://www.cari.ie/help-us/overview
Please return completed forms:
CARI
Fundraising Office
110 Lower Drumcondra Road
Dublin 9

How much money do you aim to raise for the Good Friday Appeal?

_____

_____

_____