

## Fundraising Activity | Fundraiser Details

Please complete the below application for fundraising to obtain an authority to fundraise from Variety – the Children's Charity NSW/ACT. If you have an everyday hero online fundraising page this does not need to be completed.

Full Name:

Company Name or Organisation (if applicable):

ABN:

Address:

State:

Postcode:

Phone:

Mobile:

Email:

Website/Event Page (if applicable):

Event Activity Name:

Event or Fundraising Activity Description:

How will funds be raised at this event (e.g. Ticket sales, Auction)

Date of the Event:

Time(s) of the Event:

Event Venue/Address:

State:

Postcode:

Proposed ticket price or entry fee (if applicable):

Is this activity: open to the public:      yes      no      by invitation only:      yes      no

Has the activity taken place before (if so please indicate when and how much was previously raised):

Are there any other beneficiaries (if so, who):

Has the organiser or person/s working on the fundraising activity had any connection with Variety – the Children’s Charity NSW/ACT (if so, please provide the details):

How do you plan to advertise the activity (please refer to the fundraising terms and conditions regarding use of promotional material):

Do you have or intend to seek public liability insurance for your activity:      yes      no

If yes, please provide insurance details:

If you plan to hold an event, please provide a detailed list of anticipated income and proposed expenditure:

<b>Anticipated Income</b>	<b>\$</b>
Ticket sales/entry fee	
Sponsorship	
Raffles/s	
Main Auction	
Silent Auction	
Merchandise	
Donations	
Other	
<b>Total</b>	<b>\$</b>

<b>Proposed Expenditure</b>	<b>\$</b>
Catering	
Venue	
Audio Visual	
Printing (invites, banners, posters)	
Advertising	
Entertainment	
Prizes	
Supplies	
Insurance	
Other	
<b>Total</b>	<b>\$</b>

Estimated net return to Variety – the Children’s Charity NSW/ACT \$



If you are donating funds raised from sales/income please provide the dollar amounts per item and dollar or percentage amounts that will be donated to Variety – the Children’s Charity NSW/ACT:

Variety – the Children’s Charity NSW/ACT Promotional Material Requirements: Please indicate the following items you will require for publicity purposes:

Coin collection boxes

Raffle tickets

Promotional material

Banners (provided PDF file for self-printing)

## **DISCLAIMER**

Variety – the Children’s Charity NSW/ACT reserves the right to withdraw approval to fundraise should it be necessary to protect the reputation of Variety – the Children’s Charity NSW/ACT. If this is to occur, all fundraising and promotion must cease immediately, and the fundraising authorization letter and all monies raised must be returned to Variety – the Children’s Charity NSW/ACT within seven (7) days.

## **COMMUNICATIONS**

At Variety - the Children’s Charity NSW/ACT we’d also like to keep in touch with you about the ways in which we help Aussie kids and their families, our events, fundraising appeals and opportunities to support us. If you would prefer not to hear from us, you can stop receiving our updates at any time by getting in touch or by letting us know below. For details on how your data is used and stored, see our Privacy Policy.

I’d prefer **not** to receive updates from Variety - the Children’s Charity NSW/ACT

## **AGREEMENT**

This Agreement is made between Variety – the Children’s Charity NSW/ACT, and the Fundraiser subject to conditional approval upon the terms and conditions of this Agreement.

### **SIGNED BY OR ON BEHALF OF THE FUNDRAISER:**

Yes, I have read and understand the Terms and Conditions of this Agreement and will abide by them.

Signature:

Name:

Position:

Date:

**Variety – the Children’s Charity NSW/ACT** ABN 38 003 354 934



Important: This is not an authority to fundraise until it has been signed by an authorised officer of Variety – the Children’s Charity NSW/ACT.

Please email your completed application to: [contactus@variety NSW.org.au](mailto:contactus@variety NSW.org.au)

Signed for Variety – the Children’s Charity NSW/ACT	NSW OFFICE USE ONLY
Signature:	Project approval no:
Name:	Date Letter of Authority Issued:
Position:	Supporter ID: