**Fundraising**

**Application Form**

**Your Details (the Fundraiser)**

|  |  |
| --- | --- |
| Name of Individual Responsible: |       |
| Name of Organisation or Group (if applicable): |       |
| Residential Address:  |       |
|       |
|       | State |       | Postcode |       |
| Postal Address: | [ ]  Same as above *If different please complete details below*. |
|       |
|       |
|       | State |       | Postcode |       |
| Email address: |       |
| Contact Telephone Numbers: | Mobile: |       | Home/Work: |       |
| Are you over 18?  | [ ]  Yes [ ]  No *If no, please have your legal guardian sign this Application Form.*  |
| Are you a Wildcare member? | [ ]  Yes [ ]  No  | Membership No.  |       |

**Details of Fundraising or Event**

|  |  |
| --- | --- |
| Name of Activity/Event:  |       |
| Type of Activity/Event: |       |
| Description of Activity/Event:*Please provide full details of activity including where applicable:-** *how funds will be raised*
* *proposed venue/address*
* *who the activity is targeted towards*
* *anticipated attendance numbers*
* *will any person under 18 years of age be involved and if so, in what capacity*

*Please attach a separate sheet if insufficient room.*  |       |
| Proposed Date/Time Period of activity/event: |       |
| Fundraising Target:  | $      |
| If over $1,000 please provide a budget breakdown. |
| How many people will be assisting with the activity/event? |       |
| Will all proceeds bepaid to Wildcare Australia Inc.? | [ ]  Yes |
| [ ]  No – *please list other organisations and percentage split.*  |
|       |
| Will you be seeking sponsorshipfor the event? | [ ]  Yes – *please provide a list of target sponsors* |
| [ ]  No  |

|  |  |
| --- | --- |
| Will the activity/event requirepublic liability insurance?  | [ ]  Yes [ ]  No [ ]  Unsure |
| Does the activity/event require government approvals/permits? | [ ]  Yes [ ]  No [ ]  Unsure |

**Agreement**

I, as the Fundraiser listed below, declare that:-

|  |  |
| --- | --- |
| [ ]  | I have read the Fundraising Guidelines and understand my responsibilities as a Fundraiser for Wildcare Australia Inc.  |
| [ ]  | I agree to abide by the terms and conditions of the Fundraising Guidelines, which form part of this Fundraising Application Form. |
| [ ]  | I understand my obligation to send all fundraising proceeds as agreed to Wildcare Australia Inc. within three (3) weeks of completion of my fundraising activity/event.  |
| [ ]  | I hereby provide authority to Wildcare Australia Inc. to use any photos or promotional material relating to the activity/event for any media purposes without notice and free of any fees or charges.  |

**Signed by Fundraiser**

|  |  |
| --- | --- |
| Signed (Fundraiser): |  |
| Name of Fundraiser: |       |
| Date: |       |

**Signed by Parent/Guardian:**

*(if Fundraiser is under 18 years of age)*

|  |  |
| --- | --- |
| Signed by parent/guardian: |  |
| Name of parent/guardian: |       |
| Date: |       |

**Please forward your completed Fundraising Application Form to:-**

|  |  |  |
| --- | --- | --- |
| Wildcare Australia Inc.PO Box 2379Nerang Mail Centre Qld 4211 | Or | Email to:enquiries@wildcare.org.au  |

Please allow up to three (3) weeks for your application to be considered and if approved, a Letter of Authority to be issued to you.

**Thank you for supporting Wildcare!**