



Community Event Proposal Form - Caritas Foundation

Thank you so much for your interest in organizing a community event in support of the Caritas Foundation! The first step is to complete the form below. It is ok if you are currently unable to answer all queries. For any information that is not yet available, simply leave the space blank. Your foundation representative will be in contact with you moving forward to sort out any missing information as it becomes available.

Name of Event: _____

Who is organizing the event? Company Personal

Name of Organizer/Company: _____

Contact Person: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: Preferred: _____ Secondary: _____

Email Address: _____

Twitter Acct: @ _____

Facebook Page: _____

Event Information

Briefly describe the event:

Continued on next page....



Your Caritas Foundation representative would be pleased to discuss your event needs regarding volunteers and Foundation representation. Decisions around Foundation involvement for each event will be determined at the discretion of Foundation staff based on factors such as availability, size and nature of event. We appreciate your interest in organizing a fundraiser on behalf of the Caritas Foundation.

Additional Terms and Conditions - *Please read the following and sign below to verify that you understand all the conditions outlined on this form.*

- The Caritas Foundation must accept all projects as ethical and compatible with the Foundation's mission and values.
- The public perception of the activity must not be injurious to the Foundation.
- The event should be financially viable in the opinion of the Foundation. The Foundation reserves the right to withhold the use of its name and/or logo from any event, which it feels is not financially or otherwise appropriate.
- All funds must be received by the Foundation no later than 30 days after the day of the event.

The information you provide is collected for the purpose of documentation and soliciting of donations for the Caritas Foundation. The Caritas Foundation will not share, trade, or sell your personal information, unless authorized or required by law. If you have any questions regarding this collection of information, please contact the Manager of Donor Information at 780.342.8126, Caritas Foundation, 3C60-11111 Jasper Ave NW, Edmonton, Alberta, T5K 0L4

By signing this document, I agree to the collection of the preceding information to allow the Foundation to evaluate the event and the level of the Foundation's involvement. This information may be disclosed to employees and agents of the Foundation as necessary to perform this evaluation and any requested activities. I am aware that this information will be kept for seven years by the Foundation. I also agree to the Terms and Conditions outlined above.

Signature of Event Organizer: _____ Date: _____

Accepted by: _____ Date: _____

Fax, email, or mail this form to:

Connor Brinsmead
Community Initiatives Coordinator
P: (780) 342-8463 F: (780) 342-8195
Email: connor.brinsmead@covenanthealth.ca

Caritas Foundation
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Edmonton, AB T5K 0L4