

**Cindy Mackenzie Breast Cancer Foundation, Inc.  
Community Fundraising Registration Form**

The Cindy Mackenzie Breast Cancer Foundation, Inc. (cmbcf) is a small Sunshine Coast based registered not-for-profit organisation and as such we rely on the generous support of the community to help fundraise throughout the year.

Community fundraising may be an ongoing fundraising initiative or a single event where the Foundation is the chosen beneficiary with funds raised being donated to the Cindy Mackenzie Breast Cancer Foundation.

All Funds raised on the Coast stay on the Coast to help the Foundation support Coast families with practical and financial support as they battle against breast cancer.

**Fundraiser Guidelines**

All fundraisers are required to:

- Complete and submit this fundraising registration form;
- Provide any supporting documentation, including copies of invitations and/or promotional materials that incorporate the cmbcf name or logo; and
- Remittance of fundraising funds (within 4 weeks of event completion). Complete and submit the Fundraising Remittance Statement posted on the website.

Once approved, you will receive a letter of authority from the Foundation confirming approval for your organisation to fundraise on behalf of cmbcf. Until that authority is received you are not authorised to promote the Cindy Mackenzie Breast Cancer Foundation, Inc. as the beneficiary of your event.

Current Foundation sponsors including Foundations sponsors of our annual Gala and Pinktober™ must not be approached for direct event support unless prior approval in writing is requested from cmbcf.

All marketing and promotional materials that incorporate the Cindy Mackenzie Breast Cancer Foundation, Inc. name or logo (for example invitations, advertising, flyers, website copy etc.) **MUST BE FORWARDED for APPROVAL in ADVANCE** of being printed.

The Foundation is not liable for any expenses incurred for your event and you must ensure the expenses will be covered by the money raised in addition to raising funds for cmbcf.

The Foundation reserves the right to decline approval of this fundraising event at any time should the event or the event organisers deem to be raising money for direct commercial gain or profiteering.

Thank you again for your support and please don't hesitate to contact the Foundation on 1 300 55 77 10 with any questions.

<b>Section A – Fundraiser/Organiser Contact Details</b>
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<b>Organiser/contact name(s)</b>			
<b>Organisation/Community group name</b>			
<b>Type of organisation (e.g. business, company, school, sporting club)</b>			
<b>Street Address</b>			
<b>Postal Address</b>			
<b>Telephone</b>	Business	Mobile	Fax
<b>Email</b>			
<b>Would you like to go on the cmbcf database?</b>	Yes, please	No, thank you	

<b>Section B – Community Event Details</b>
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<b>Name of Event</b>			
<b>Date of Event</b>			
<b>Time of Event</b>	Start time: End time:		
<b>Venue</b>	Name: Address: Phone:		
<b>Estimated no of guests</b>	<b>Ticket price</b>		
<b>Have you raised funds for cmbcf previously?</b> If yes, when and where?	Yes	No	
<b>How do you intend to raise funds?</b> (eg: donate a percentage of ticket sales, sell raffle tickets, silent or live auction proceeds, collect donations, sell cmbcf merchandise etc.)			
<b>Will all the proceeds be received by cmbcf?</b> If no, please list other recipient organisation(s) and percentage split:	Yes	No	
<b>Please provide any other relevant information regarding the event.</b> Attach additional information as necessary			



**Section C – Event Budget** (to help with your planning)

The event cannot be used for your own direct commercial gain or profiteering. The event must have the potential for financial success so that neither the organisation nor the Foundation is liable for unpaid expenses. All funds received and expended should be accounted for. Using the budget below please provide an outline to the best of your ability advising an estimate of the net income to be received by cmbcf post event.

<b>Activity</b>	<b>Estimated Amount</b>
<b>Income</b> (approx) from ticket sales, raffle tickets, silent and/or live auction sponsorship etc.	\$
<b>Expenses</b> (approx) for event including catering, venue hire, decorations, advertising, printing, photographer etc.	\$
<b>Estimated funds to be raised for the Cindy Mackenzie Breast Cancer Foundation</b>	\$

All Fundraising in Queensland must adhere to the *Charitable and Non-Profit Gaming Act 1999*. For information on charities and fundraising in Queensland helpful websites to check out are [www.ato.gov.au/nonprofit/content](http://www.ato.gov.au/nonprofit/content) and [www.fairtrading.qld.gov.au](http://www.fairtrading.qld.gov.au).

**Section D – Assistance from the Cindy Mackenzie Breast Cancer Foundation**

Would you like to use the cmbcf logo?	Yes	No
Would you like to use the Pinktober™ logo?	Yes	No
In which way(s) do you intend to use the logo(s)?		
Do you require cmbcf brochures? If yes, please advise quantity:	Yes	No
Do you require a listing on website? (check out <a href="http://www.cmbcf.com.au">www.cmbcf.com.au</a> for information required)	Yes	No
Will you be sending press releases to the local media? (If yes, forward copies to the Foundation for approval)	Yes	No
Would you like a cmbcf Ambassador to speak or emcee your event? <i>This is dependent upon availability</i>	Yes	No
Will you provide two tickets for cmbcf representatives to attend your event?	Yes	No
Official cmbcf merchandise items are available to sell at events. Please contact the Foundation directly to discuss your requirements. Date of delivery required by _____.		



**Section E – Insurance and Legal Matters**

Do you have Public Liability insurance for this activity	Yes	No
Does the activity require permits from the Council/ Government bodies?	Yes	No
Does the activity involve raffles, auctions, competitions?	Yes	No

**Section F – Fundraiser Acknowledgement**

I have read the Cindy Mackenzie Breast Cancer Foundation guidelines outlined on page one and agree to the Fundraising rules and regulations.

I understand the Cindy Mackenzie Breast Cancer Foundation reserves the right to withdraw approval of this fundraising event at any time, should the event organiser(s) fail to comply with the Foundation's fundraising guidelines.

I agree to pay all costs associated with the activity and have provided an estimated budget outline for consideration.

I confirm that all information provided in this document is correct at the time of submission. Any amendments post approval process will be emailed to the Foundation for further review prior to the activity being held.

**Name(please print):** \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

