

Third Party Event Proposal Form

Before organizing your event, please complete this form and return it to Toronto General & Western Hospital Foundation (TGWHF). Applications must be approved by TGWHF prior to publicizing or holding an event.

Date of Application: _____

Event Planner Details

Group/Company Planning Event: _____

Name of Individual Responsible: _____

Mailing Address

Home Work _____

City: _____ Province: _____ Postal Code: _____

Primary Telephone: _____ Alternative Telephone: _____

Email: _____ Fax: _____

How did you hear about us? _____

Proposed Event Details

Name of Proposed Event: _____

Date: _____ Start Time: _____ End Time: _____

Event Venue: _____

Address: _____

Type of Event: _____

How many people do you expect to attend the event? _____

Please provide a brief description of the proposed event: _____

What was the inspiration for the proposed event? _____

How will funds be raised for TGWHF? _____

Proposed Event Budget

All costs to be paid directly by the event organizer. Please estimate all revenue and expenses. Indicate items you expect to be donated (if any).

<u>Revenue</u>		<u>Expenses</u>	
Sponsorship	\$ _____	Venue	\$ _____
Registration Fees	\$ _____	Food & Beverage	\$ _____
Ticket Sales	\$ _____	Advertising	\$ _____
Donations	\$ _____	Security	\$ _____
Ancillary Fundraising (silent/live auctions, etc.)	\$ _____	Printing (tickets, posters, etc.)	\$ _____
		Prizes	\$ _____
		License Fee	\$ _____
		Other (please specify)	\$ _____
TOTAL REVENUE	\$ _____	TOTAL EXPENSES	\$ _____
NET PROCEEDS to TGWHF		\$ _____	

Have you read and do you understand TGWHF's Third Party Event Policies? Yes No

Would you like the funds raised to be used for the Highest Priorities of Toronto General Hospital & Toronto Western Hospital, or designated to a specific program?

Highest Priorities Research Infrastructure Other _____

Name of Applicant _____ Date _____

Signature _____

Please return the signed and completed Form to the address below:

Attention: Laura Cheng
Toronto General & Western Hospital Foundation
R. Fraser Elliott Building, 5S-801
190 Elizabeth Street, Toronto, Ontario M5G 2C4
 Email: laura.cheng@uhn.ca | Tel: 416-340-4800, ext. 6279 | Fax: 416-340-4864

*Thank you for supporting Toronto General Hospital & Toronto Western Hospital
 Your generosity is greatly appreciated!*

Charitable Organization No. 12386-4068 RR0001
 tgwhf.ca

FOR FOUNDATION USE ONLY

Approved by _____ Date approved _____