



Boys & Girls Clubs



Big Brothers Big Sisters

Boys & Girls Clubs Big Brothers Big Sisters  
of Edmonton & Area

# Community Fundraiser Application Form

Event Name: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location (Address/Facility/City): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact \_\_\_\_\_ Email: \_\_\_\_\_

**Fundraising Goal:** \_\_\_\_\_ **Expected Number of Attendees:** \_\_\_\_\_

Description: \_\_\_\_\_

**Would you like to use the BGCBig logo on your event promotional material (circle one)?** Yes / No

**Do you require a customized fundraising page (accepting donations online – preferred)** Yes / No

**Would you like a BGCBig representative to attend the event (circle one)?** Yes / No

**If yes, what involvement will they have? Please note this is subject to availability.**

- Speech
- Cheque Presentation
- Press Conference
- Other: \_\_\_\_\_

**Are you planning on-site fundraising eg. 50/50, Raffle or other (circle one)?** Yes / No

<https://aglc.ca/gaming/charitable-gaming/licences/raffle-20000-and-less>

*If so, please provide advance notice to BGCBig as raffle licences need to be acquired through AGLC.*

Are you planning on raising funds through fees for participation? If so, please advise cost per person? \_\_\_\_\_

Social Media Handles: Instagram: \_\_\_\_\_ Facebook: \_\_\_\_\_

Twitter: \_\_\_\_\_ YouTube: \_\_\_\_\_ Other: \_\_\_\_\_

## ACKNOWLEDGMENTS

- I acknowledge that BGCBig reserves the right to withdraw its name from the event at any time.
- I acknowledge that BGCBig reserves the right to request references.
- I acknowledge that I have read the information contained in the BGCBig Community Fundraising Guidelines.
- I agree to remit all funds raised (in excess of your expenses) to BGCBig within two weeks following the event. Failure to do so may result in criminal prosecution if it is deemed this event intended to raise funds for a purpose otherwise agreed to in this application.
- I acknowledge that BGCBig may request copies of appropriate insurance be provided before an event is approved.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
BGCBig Executive Director

\_\_\_\_\_  
BGCBig Signature

\_\_\_\_\_  
Date