



# Good Shepherd Third Party Event Form

Please send tax receipt (\*See below)  Request "Thank You" letter

Name of Organization: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

<u>Type of Donation Anticipated</u>	<u>Event Details</u>
<b>Food:</b> <input type="checkbox"/> Canned Goods <input type="checkbox"/> Prepared Foods <input type="checkbox"/> Fresh Produce <input type="checkbox"/> Meats	Name of Event: _____ Type of Event: _____
Details: _____	Date/Time: _____
<b>Clothing:</b> <input type="checkbox"/> New <input type="checkbox"/> Used	Location: _____
Details: _____	Event organizers agree to submit revenues to Good Shepherd Development Office within 14 days.
<b>Toys:</b> <input type="checkbox"/> New <input type="checkbox"/> Used	Anticipated Donation: \$ _____
Details: _____	Will supporters expect tax receipts?* <input type="checkbox"/> Y <input type="checkbox"/> N
<b>Household:</b> <input type="checkbox"/> New <input type="checkbox"/> Used	Please provide copies of sales receipts for new items.
Details: _____	Designation of Funds/Goods raised:
<b>Money:</b> <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Gift Certificate(s)	<input type="checkbox"/> Where the need is most urgent
Amount: \$ _____	<input type="checkbox"/> Program: _____
<i>Other Information or Comments</i> _____ _____ _____ _____	<p style="text-align: center;"><i>All promotional materials must include Good Shepherd's name and logo. Please contact us to request an electronic version of our logo. The final materials must be approved by the Manager of Communications.</i></p>

Donor Representative: \_\_\_\_\_  
(Please Print Clearly)

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Good Shepherd Representative: \_\_\_\_\_ Date: \_\_\_\_\_

If you have items to drop off or to arrange a pick-up time, please call  
Brother Terence Aylward at 905.972.9485 x2210.

\* Good Shepherd can only provide Tax Receipts for cash donations of \$15.00 or more. If a Tax Receipt for goods is requested, this form must be accompanied by Proof of Value (invoice, cash register receipt, etc.)

## COMMUNITY FUNDRAISING GUIDELINES

In order to ensure a successful partnership with Good Shepherd, all Community Fundraising Events must adhere to the following guidelines when fundraising:

1. Use of Good Shepherd's name and/or logo to promote a fundraising event must be approval by Manager of Communications. All materials bearing Good Shepherd's logo/name must be submitted four weeks in advance of the approved event prior to printing and/or publishing.
2. Bingo nights, raffles, "Monte Carlo" events and 50/50 draws must be sanctioned by the Alcohol and Gaming Commission of Ontario. Event organizers are responsible for obtaining all required licences or permits.
3. Fundraising events should not conflict with the Mission of Good Shepherd. (For information, please contact Good Shepherd or visit [goodshepherdcentres.ca](http://goodshepherdcentres.ca)).
4. Official tax receipts will only be issued in accordance with Canada Revenue Agency guidelines. The final decision to issue official tax receipts is discretionary and rests solely with Good Shepherd. If you wish for receipts to be issued please discuss with a staff member in advance of your event.
5. Net revenue funds must be submitted to Good Shepherd no later than two weeks after the event takes place.
6. Event organizers must notify Good Shepherd if the fundraising event is cancelled prior to the planned event day.
7. Event organizers must provide their own staffing and volunteers for their event and must use their own mailing/contact list(s) to promote and solicit for their fundraising event.

### Privacy Statement:

We respect your privacy. Good Shepherd collects your personal information in order to process your request to organize a fundraising event and will not use such information for any purpose other than that stated.

I have read and agree to follow Good Shepherd's Community Fundraising Guidelines.

Donor Representative: \_\_\_\_\_  
(Please Print Clearly)

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Good Shepherd Representative: \_\_\_\_\_  
(Please Print Clearly)

Good Shepherd Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit your completed Third Party Event Proposal and Guidelines forms.

### Good Shepherd Development Office

10 Delaware Ave, PO Box 1003, Hamilton ON L8N 3R1  
905.528.6565 x3310 [krutherford@gsch.ca](mailto:krutherford@gsch.ca) Fax # 905-528-6967

***On behalf of Good Shepherd, thank you for your time, effort and support.  
Good luck with your fundraising project!***