

Cystic Fibrosis Canada - Ontario 2323 Yonge Street, Suite 800 Toronto, ON M4P 2C9 T:1.800.378.2233 E: ontario@cysticfibrosis.ca www.cysticfibrosis.ca

## **Hosting a Cystic Fibrosis Canada Community Event**

Thank you for joining Cystic Fibrosis Canada in the fight for a cure!

We rely on the generous support of our volunteers, donors, and partners in our shared mission to improve the lives of Canadians living with cystic fibrosis (CF), and ultimately to find a cure for this devastating disease. Whether you have organized an event before or this is your first time, we want your fundraiser to be a great success and we are here to help you and support you by:

- Offering the ability to create an online event or team page to communicate information and receive donations online (click here to set up your page)
- Offering advice and information on event planning logistics
- Providing a letter of support to validate the event and its organizers
- Providing letters for volunteer hours
- Providing tax receipts for eligible donations (please review the <u>Tax Receipting Guidelines</u> for eligibility and requirements)
- Additional event support where possible

Please keep in mind that we cannot do the following:

- Provide any sponsorship, funding or reimbursement for event expenses
- Solicit or provide contact information for donors or staff
- Endorse applications for and/or obtain any necessary licenses or permits (i.e. gaming and/or liquor)
- Provide insurance coverage or complete insurance applications
- Approach potential sponsors on your behalf, or provide you with contacts for sponsorship
- Assume any legal or financial liability associated with the Community Event

## **Organizing your Community Event**

- Complete the Community Event Application and submit to Cystic Fibrosis Canada at least three (3)
  weeks prior to the proposed fundraising event
- Ensure that you have read and understand Cystic Fibrosis Canada's <u>Infection Control Policy</u> (events must fully comply with this policy to mitigate the risk of cross-infection between individuals living with CF)
- Ensure that you have read and understand the Tax Receipting Guidelines
- Research any licenses, permits, gaming regulations, and/or insurance requirements that may pertain to your event, and attain approval or coverage where applicable
- If event details or timing is changed, or the event is cancelled, the organizer must contact Cystic Fibrosis Canada as soon as possible to advise of the changes
- Event proceeds are to be submitted to the Cystic Fibrosis Canada Chapter or the Cystic Fibrosis Canada staff contact within 45 days of the event completion

## **Receiving Approval for your Event**

Once your application has been reviewed and approved, the Community Event Contract will be signed by Cystic Fibrosis Canada and a copy will be sent to you. Approval will be granted on a per event basis and Cystic Fibrosis Canada reserves the right to deny the application of any Community Event.



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## **Community Event Application**

Part 1: Event Organizer Contact Information
Organizer Name(s):
Organization/Business Name (if applicable):
Address:
City: Postal Code:
Phone:
Email:
Reason for supporting Cystic Fibrosis Canada:
Part 2: Event Information
Event Name:
Is this an annual or repeating event?  If yes, for how long and how frequently (i.e. annually, bi-annually, etc.) has the event been running?
Event Date:
Start and End Time:
Location/Venue (including address):
Overview of Event:
Projected Attendance:
Is your event open to the public or by invitation only?
How will you be raising funds (i.e. ticket sales, sponsorship, auction, donations, etc.)?



Will alcohol be served at the event?

If yes, does the venue have a valid liquor license?

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Ticket/Registration Price (if applicable):		
What percentage of the proceeds will benefit Cystic Fibrosis Canada?		
Full Amount Raised Net Proceeds Partial Rev	venue 🔲	%
Will any of the proceeds benefit any other charities? YES N	0 🗍	
If yes, please list the charity name(s):		
Part 3: Financial Information		
Anticipated Revenue and Expenses		
Gross Revenue (what you expect to raise before expenses, not including sponsor	orship)	\$
Sponsorship (if applicable)		\$
Expenses		\$
Total estimated revenue (less applicable expenses) to be submitted to Cystic Fil	brosis Canada	\$
Submitting the Funds to Cystic Fibrosis Canada		
Submission Method (i.e. in person, by mail, etc.):		
Anticipated Submission Date (must be within 45 days of the event date):		
Will event donors require tax receipts for their contributions?	YES	NO
<b>Note</b> : Online donations received through an <u>event or team fundraising page</u> will automatically receive an electronic tax receipt. Receipt eligibility is outlined in the <u>Tax Receipting Guidelines</u> .		
Part 4: Licensing and Permits		
Liquor License, Permits, Gaming and Insurance Requirements		
<b>Note</b> : If your event requires licenses, permits, insurance or otherwise as noted below, you must conforms for all applicable requirements and provide Cystic Fibrosis Canada with a copy of the appropriate to the event start date. <b>Cystic Fibrosis Canada cannot complete or assist with the application</b>	val or license at led	ast <u>two (2) weeks</u>

NO

YES

YES



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Does the event require a Special Occasion Permit required?	YES NO
Does the event require insurance?	YES NO
Does the event require a gaming permit?	YES NO
Does the event require any other form of license, approval or otherwise?	YES NO
If yes, please list those required:	
Part 5: Event Marketing and Promotions	
How do you intend to promote your event? Please check all that apply.	
Social Media Email TV	Radio
Signage/Posters Print Materials Magazine	Newspaper
Other (please specify):	
Please list any specific details about your selections (i.e. social media page/a will be displayed, who will be contacted by email, etc.):	
Do you intend to use the Cystic Fibrosis Canada logo on your materials?	YES NO
Note: Permission must be given by Cystic Fibrosis Canada prior to the use of our logo, and all If yes, please describe where and how the logo will be used on promotional	
Will you have an event website?	YES NO
<b>Note</b> : This does not apply to an <u>event or team fundraising page</u> set up through Cystic Fibrosis	is Canada.
If yes, please list the URL:	
Would you like access to Cystic Fibrosis Canada promotional materials?	YES NO
<b>Note</b> : Access to materials is based on availability and can vary from year-to-year or from eve	ent-to-event.
If yes, list the types of materials you would like to request (i.e. banners, coll	lection boxes, brochures, etc.):



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Are there any other event details or	r requests that you would like to prov	vide? YES NO			
Community event criteria and guidelines ha	ve been established in accordance with CRA g	guidelines.			
Community Event Contract					
"Cystic Fibrosis Canada Community approved event until written appro- amendment, modification or waive	cally agree to all the terms and condi Event Guidelines". I understand that val of my application is received from r of any of the terms and conditions of Event Guidelines" shall be valid unle	t my event is not considered an n Cystic Fibrosis Canada. No contained in this document and the			
I have read and agree to comply wit	ch Cystic Fibrosis Canada's Infection F	Prevention and Control Policy.			
At no time will Cystic Fibrosis Canada, or any representative of Cystic Fibrosis Canada, be responsible for the cost, planning, or staffing of my event, nor will they be liable for personal injuries or damages to property which may occur during my event. I agree to indemnify and hold harmless Cystic Fibrosis Canada and their employees, agents and representatives, from any and every claim, demand, suit and payment related to or caused by my event.					
By signing this agreement you agree to submit full, net or partial (as specified in Part 2) to Cystic Fibrosis Canada's National Office or your local Chapter Office within 45 days of your event.					
We appreciate your support and effort in making a difference, and look forward to working with you!					
Name Community Event Coordinator	Signature	Date			
Name Cystic Fibrosis Canada - Ontario	Signature	Date			

Please return completed application and signed contract to:

Your local Cystic Fibrosis Canada Chapter or Regional Office - OR -

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