



## Third Party Event Application Form

(Charitable Business # 11927 9131 RR0001)

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Thank you for choosing to support Royal University Hospital Foundation with your proposed Third Party Event. To best support you and your efforts we ask that you complete and submit this application in advance of developing your activity.

Please note that the Foundation will enter into a third party cause-related marketing agreement (where a portion of the proceeds from the sale of a product or service is donated to RUH Foundation) only after due diligence is performed to ensure the integrity and financial stability of the proposed business partner and to confirm that the proposed marketing is appropriate for the Foundation.

Upon approval of your fundraiser you will receive a Third Party Event Agreement to be signed by the principal organizer to serve as written commitment in accordance with the terms and conditions as outlined in the Agreement.

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### CONTACT INFORMATION:

Name/Organization:

Contact Person:

Address:

City & Province:

Postal Code:

Business Phone:

Home Phone:

Cell:

Email address:

Fax:

Can we use the above contact information on our website so people can contact you?

Yes  No

Please select the category that best describes you or your organization:

Individual  Community  Corporate  School  Service Club  Employee Group

Other: (please specify)

### EVENT INFORMATION:

Event Name:

Event Date(s) & Time:

Event Location:

Is there an event website?  Yes  No (If yes, please specify)

Will you be using other social media to promote this event?  Yes  No (If yes, please specify)

Is this a first time event?  Yes  No (If no, please provide event dates and amount raised)

Target Market for Event:  Employees  Customers  Members  General Public  
 Other:

Please briefly describe your event (i.e. location, cost to participants, etc.):  
*We will use this information to promote your event on our website.*

Do you require charitable receipts to be issued? (See Third Party Guidelines)  Yes  No

Will you be applying for a lottery license from SLGA:  Yes  No

**PUBLIC RELATIONS INFORMATION:**

Will you be working with an individual or company to promote your event?  Yes  No  
(If yes, please specify)

Will materials, such as flyers and posters be distributed to promote the event or campaign?  
 Yes  No (If yes, please indicate the extent of distribution and dates of release)

Do you intend to use the name and/or logo of Royal University Hospital Foundation in your printed materials? If so, please indicate when you would need a camera-ready logo.

NOTE: All promotional materials must be reviewed and approved by Royal University Hospital Foundation prior to their distribution.

**FINANCIAL INFORMATION:**

Estimated gross revenue: \$

Estimated expenses: \$

Estimated net proceeds to Royal University Hospital Foundation: \$

Anticipated date the Foundation will receive donation (within 30 days of the event)

All fundraising activities which benefit patient care at Royal University Hospital are coordinated by the Royal University Hospital Foundation. If you have any questions about this application we'd love to hear from you. Please contact RUH Foundation at 306.655.1984.

Signed: \_\_\_\_\_ Date:

Please print name and position:

Royal University Hospital Foundation Representative:

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

Print name and position:

THANK YOU FOR SUPPORTING  
ROYAL UNIVERSITY HOSPITAL FOUNDATION  
103 Hospital Drive Saskatoon, SK S7N 0W8  
Phone: 306.655.1984 Fax: 306.655.1979  
Email: info@ruh.org Website: ruh.org



## Third Party Event Agreement

The Event Organizer agrees to submit all copy for advertisements, point of purchase materials and other project-related promotional materials to Royal University Hospital Foundation and to obtain the Foundation's written permission before production or use. The Foundation expressly reserves the right to final approval on all Royal University Hospital Foundation promotional materials.

The Event Organizer agrees to use only the authorized name and logo of Royal University Hospital Foundation in all media and printed materials relating to the special project/promotional campaign/event.

The Event Organizer agrees to underwrite all costs of the special project/promotional campaign/event or to secure such underwriting. No costs shall be incurred by Royal University Hospital Foundation unless otherwise agreed in writing prior to the special project/promotional campaign/event.

The Event Organizer agrees to provide names of prospective sponsors to Royal University Hospital Foundation for review prior to contacting them for support.

Royal University Hospital Foundation agrees to provide the SPONSORING ORGANIZATION with recognition commensurate with the level of giving as set forth in Royal University Hospital Foundation's Donor Recognition Policy.

The Event Organizer agrees to handle all monetary transactions for the special project/promotional campaign/event and to present the net proceeds to Royal University Hospital Foundation within 30 days of the special project/promotional campaign/event.

The Event Organizer agrees to provide all staffing and volunteers for the special project/promotional campaign/event unless otherwise agreed in writing.

The Event Organizer agrees to use its own mailing list for the special project/promotional campaign/event unless otherwise agreed in writing.

The Event Organizer understands that there is a Recovery of Fundraising Cost (ROFC) Policy that is consistent with other Saskatoon hospital foundations. Full details of the policy can be found on the Royal University Hospital Foundation website. The ROFC will be applied to net proceeds transferred to all Saskatoon Health Authority designated areas of support or endowment fund.

I have read this authorization and waiver and fully understand it and all its provisions and obligations. By signing below, I indicate my agreement and understanding.

\_\_\_\_\_ Date:  
Signature of Contact

Print Name of Contact:

For Office Use Only: Date Application Received: Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No    Foundation Staff Initial:
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