

QEH FOUNDATION SPECIAL EVENT FORM

If you or your organization is planning on hosting a fundraising event in support of the Queen Elizabeth Hospital Foundation, please complete and submit this Special Event Form. **Thank you for selecting the QEH Foundation as the recipient of funds raised from your event. We appreciate your support!**



Return to: Queen Elizabeth Hospital Foundation
PO Box 6600, Charlottetown, PE C1A 8T5
Phone: (902) 894-2956 Fax: (902) 894-2433
Email: Lynn Anne Hogan lahogan@ihis.org

Contact Information

Name/Company/Organization: _____

Please circle the category that best describes you: Corporation / School / Community / Service Club / Individual

Contact Person: _____ Phone: _____ Email: _____

Your Relationship to the Organization: _____

Address: _____ City: _____ Postal Code: _____

Event Information

Name of Event: _____ Date of Event: _____

Type of Event (*please circle all that apply*): One-time / Annual

Location of Event: _____ Expected Number of Participants: _____

Target Audience of Event (*please circle all that apply*): Family and Friends / Community / Customers / Staff / Students

Description of Event:

What inspired you to create this event?

Will the event be managed by a professional agency? _____

If yes, please list the name of the agency: _____

Will any other charitable organization(s) benefit from this event? _____

If yes, please list the additional beneficiaries: _____

Will you be approaching sponsors for the event/program? _____

If yes, please list the organizations, businesses and/or individuals you intend to approach: _____

Briefly describe the proposed marketing plan for the event/program (ie: social media, print ads, radio): _____

Do you plan to use the QEH Foundation name and/or logo in your print materials, online, etc.? _____

Note: All materials featuring the name and/or logo of the QEH Foundation must be approved by the QEH Foundation before publication.

Financial Information

How will funds be raised? (*please circle all that apply*): Pledges / Donations / Online Donations / Ticket Sales / Product Sales / Auction / Raffle / 50 50 / Bingo / Other (*please specify*): _____

Expected expenses: _____ Anticipated net proceeds: _____

Estimated amount proceeds to be donated to QEH Foundation: _____

How will the proceeds be sent to the Foundation? (*please circle one*): Cash / Cheque / Other (*please specify*): _____

Note: Please remit the donation by cheque or cash as pledge forms (if applicable) so receipts can be issued.

QEH Foundation Support

The QEH Foundation will be pleased to promote your event through its social media channels by sharing your event posts through Facebook and Twitter, as well as free community event listings including submission to The Buzz, if received in time for submission (14th of the month prior to the month). We can also guide you in booking community call-in (CBC Radio) and Community Segment (CBC Compass).

The undersigned shall indemnify and hold harmless the Queen Elizabeth Hospital Foundation from and against all liability, claims, damages, or expenses due to or arising out of this event. As well, the undersigned will obtain at their own expense, all permits and licenses required to conduct the special event.

SIGNED: _____ DATE: _____

For Foundation use only:

Approved by: _____ Title: _____

Comments:
