# U:\COMMUNICATIONS AND MARKETING\Logos\Logos - Archived\HSC logos\HSC Header.jpg

# Third Party Event Proposal Form

# Please complete to the best of your ability.

## Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  |  |  |
|  | Last | First |  |
| Chapter: |  |
|  |  |
| Address: |  | |  |
|  | Street Address | | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | Province | Postal Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Phone: |  | Alternate Phone: |  |

|  |  |
| --- | --- |
| Email |  |

## Event Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Event Date(s): | |  | | Venue: |  |
| Start time: | |  | | End time: |  |
| Briefly describe your event: | | |  | | |
|  | | |  | | |
|  | | |  | | |
|  | Will liquor be served at the event? : Yes  No  If so, who holds the liquor license?  Is this the first year of the event? : Yes  No  What are your goals for the event (please list any financial and promotional goals)? *(ex. 100 attendees)* : | | | | |
|  |  | | | | |  |
|  |  | | | | |
|  |  | | | | |

## Event Budget

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Estimated Gross Revenue *(before costs)* | $ |  | |  |
|  |  |  | |  |
| Anticipated Expenses:  Venue Rental: | $ | | |  |
|  |  | | |  |
| Food & Beverage: | $ | |  |  |
|  |  | |  |  |

|  |  |  |
| --- | --- | --- |
| Advertising: | $ | |
| Printing: | $ | |
| Prizes: | $ | |
| Other:  (please be as specific as possible) | $ | |
|  | $ | |
|  | $ | |
|  | $ | |
| Total Expenses: | $ | |
| Estimated Net Revenue *(after costs):* | $ | |
| Total Expenses: **$** |  |

## Promotion

|  |  |  |  |
| --- | --- | --- | --- |
| What support do you require from the Huntington Society?:  HSC Table Display  HSC Brochures  HSC Banner  Fundraising Page/Online Registration  Race/Lottery License\*  Tax Receipt(s)\*\*  Other: Click here to enter text.  **\**Race/Lottery License:*** *Please note that the Gaming Services Act (GSA) regulates events such as bingos, races, Monte Carlos, casinos, and 50/50 draws. Huntington Society staff must apply for the required license as stated in the GSA. Please allow for a minimum of four weeks to process applications.*  ***\*\*Tax Receipts:*** *will be issued at the sole discretion of Huntington Society of Canada based on Canada Revenue Agency guidelines. The issuing of receipts must be approved by Huntington society of Canada before the event.*  *Huntington Society will not be responsible for obtaining a liquor license.* | | | |
| Will your event be promoted: | | Privately *(internally)*  Publicly  Both | |
| How will you promote your event: | | | Word of Mouth  Posters/Flyers  Brochures  TV |
|  | | | Social Media  Newspaper  Radio  Web |
| Other: | | |  |
|  | Please tell us any additional information about your event or list any questions you may have: | | |
|  |  | | |  |
|  |  | | |
|  |  | | |
|  |  | | |
|  |  | | |
|  |  | | |
|  |  | | |

## Agreement

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree that the information in this form is the best representation of the event I/we plan on  organizing on behalf of the Huntington Society of Canada. | | | | |
|  |  | |  |  | |
|  | *Signature* | |  | *Date* | |
|  |  | I have read, understand and agree to be bound by the Terms and Conditions as identified above. | | | | | |
|  | Name of Organizer: |  | |  |  | |
|  | Signature of Event Organizer: |  | | Date: |  | |
|  | Signature of HSC Representative: |  | | Date: |  | |

Thank you for supporting the search for meaningful treatments and a world free from Huntington disease!