

THIRD PARTY FUNDRAISING GUIDELINES

Third Party fundraising is welcomed by Therapy Focus. In granting an Endorsement letter, Therapy Focus requests that you adhere to the following Fundraising Guidelines:

Therapy Focus Inc ABN: 67 796 715 775
Suite 5/1140 Albany Hwy Bentley WA 6102
PO Box 20 Bentley WA 6982
Ph: (08) 9478 9500 Fax: (08) 9451 5480
www.therapyfocus.org.au

- All fundraising activity must be endorsed by Therapy Focus. Donations will only be accepted from individuals, organisations, and companies whose image supports the values, mission and strategic objectives of Therapy Focus.
- Once we have received your signed **Third Party Fundraising Agreement** and **Third Party Fundraising Application** and we are satisfied that the fundraising activity fits with the values, mission and strategic objectives of Therapy Focus, we will forward you an endorsement letter.
- If an event or activity which is to benefit Therapy Focus is approved, it must be stated that proceeds will be directed to Therapy Focus.
- All fundraising activities must be undertaken to promote the community standing, good name and services of Therapy Focus.
- Monies raised via fundraising activities must be for the stated purpose of the appeal.
- An event or activity organised by a third party is not an official Therapy Focus event or activity.
- No statement in third party advertising should imply that a product or service is recommended or endorsed by Therapy Focus.
- All events and/or activities must be held for the stated purpose and within the timeline outlined in the completed third party application.
- Third party organisers must take sole responsibility and liability for the planning, promotion and management of an event or activity. This may include soliciting prizes, organising publicity and providing goods and services. Therapy Focus may provide guidance and support when needed.
- The third party must ensure that its officers, employees, agents, partners, volunteers, contractors and associates do not represent or hold themselves out as having any authority to act on behalf of Therapy Focus.
- Any intellectual property, including the Therapy Focus name, trademarks, logo, and other branded materials must not be used in any way for awareness or fundraising or on any merchandise without the prior written consent of Therapy Focus.
- Therapy Focus reserves the right to approve any media release, artwork, description of an event or activity and wording before it is published or distributed.
- Third fundraisers are not covered by Therapy Focus' Public Liability Insurance.
- Therapy Focus recommends that Third Party events or activities encourage members of the public who wish to make a donation, to do so directly to Therapy Focus or via the website www.therapyfocus.org.au.
- Receipts for tax purposes can only be issued to people giving donations of money (above \$2.00). *The following are not tax deductible: raffle ticket purchases, purchases of goods (e.g. chocolates, merchandise) or services, purchases of goods and services at an auction.*
- Total income and expenditure reports for the event or activity should be submitted along with a cheque/ money order within 28 days of the end of the event or activity.

- Therapy Focus reserves the right to withdraw its approval for the fundraiser/event at any time if it appears that there is a likelihood of the fundraiser failing to adhere to any of the above Guidelines. Further to this, endorsement letters will not be issued where the viability of the fundraising activity is in doubt.

THIRD PARTY FUNDRAISING AGREEMENT

I,.....(*Coordinator's Name*)
accept the terms and conditions of the Fundraising Agreement set out in the Therapy Focus' Third Party Fundraising Guidelines.

I agree to conduct my fundraiser/event

.....
(*name of fundraiser/event*) in accordance with those terms and conditions and in a manner which upholds Therapy Focus' integrity, professionalism and ethos.

Signed: Date:.....

Thank you for your support. Please complete and return this **Third Party Fundraising Agreement** together with the attached **Third Party Fundraising Application Form** to:

Communications Manager
Therapy Focus
PO Box 20, BENTLEY 6982
Phone: (08) 478 9500
Facsimile: (08) 94515480

THIRD PARTY FUNDRAISING APPLICATION

1. Contact Details

Name of Applicant (Organisation, Business or Individual):

.....

Contact Person(s):

.....

Mailing Address:

.....

.....

Phone: (.....)..... Mobile:

Fax: (.....)..... Email:

How did you hear about Therapy Focus?

.....

.....

.....

Why did you decide to support Therapy Focus?

.....

.....

.....

.....

2. Fundraising Activity

Type of activity / event do you want to do:

.....

.....

.....

.....

.....

Date of Proposed Activity:

Location:

Brief Description of Event / Activity:

.....
.....
.....
.....
.....

Activity / Event Timeline:

.....
.....
.....
.....
.....

Name of sponsors and/or products to be promoted or used *(This is to allow us to ensure that there is no conflict with our policies and current sponsorship arrangements.) Include details of sponsors you have approached or intend to approach as well as those you have secured:*

.....
.....
.....
.....
.....

Identified Risks:

.....
.....
.....
.....
.....

Cancellation Plan *(if required)*

.....
.....
.....
.....
.....

Fundraising Event Action Plan

Objectives:

.....

Target Group:

.....

3. Promotion / Advertising Strategies

Will you be publicising your event? Yes No

If so please tick which strategies you will utilise:

- | | | | | |
|------------------------------------|---------------------------------|-------------------------------------|------------------------------------|--------------------------------|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Radio | <input type="checkbox"/> Television | <input type="checkbox"/> Magazines | <input type="checkbox"/> Signs |
| <input type="checkbox"/> Posters | <input type="checkbox"/> Flyers | <input type="checkbox"/> Email | <input type="checkbox"/> Letter | |

Other:

Please describe how you will use these strategies to promote your event:

Therapy Focus must approve any advertising including any media releases and advertisements that include Therapy Focus name and / or logo.

.....

How and/or where do you wish to have Therapy Focus involvement?

.....

What support do you need from Therapy Focus? (e.g. donation buckets, signage, merchandise etc) Please bear in mind that as a not-for-profit our time and resources are limited.

.....

What benefits do you see to/for Therapy Focus as a result of this event?

.....

Have you raised funds for Therapy Focus before? Yes No

If so when was the event?.....

How did you fundraise?

Proceeds

Will any other organisation benefit from the fundraising?

Yes No

Name of organisation:

.....

If you are donating a portion of the net proceeds from your event, rather than the full amount, please specify what percentage or dollar value you will be giving?

% of Proceeds: **or Value of Proceeds:** \$.....

4. Acceptance of the Therapy Focus Guidelines by the Organisation or Group

Name:

.....

Position:

.....

Organisation:

.....

Signature: **Date:**

I have also read and signed the attached Therapy Focus Third Party Fundraising Guidelines & Agreement Yes No

Thank you for your support. Should you have any queries, please do not hesitate to contact the Communications Manager on the details provided below.

Please return completed application to:

Communications Manager
Therapy Focus
PO Box 20, BENTLEY 6982
Phone: (08) 478 9500
Facsimile: (08) 94515480

Office use only

Date Third Party Fundraising Agreement & Application received by Therapy Focus:

.....

Name of receiving officer:

.....

Position:

.....

Signature: **Date:**

Approval granted: Yes No

Endorsement letter sent: Yes No

Date of Application notification: