



Third Party Fundraising Event Proposal Form

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Today's Date: _____

Name of Individual/Group Planning Event

Your Group is : ☐ corporation ☐ school community group / service club / individual
other _____

Contact Name: _____ Email: _____

Address: _____

Phone: _____ Other (fax, etc.) _____

Group's Website (if applicable): _____

EVENT INFORMATION

Event Name: _____

Event Date: _____

Type of Event: _____

Event Location and Address:

Event Description:

Media you expect to involve/invite: _____

What Inspired you to do this event? _____

I would like a Crossroads International representative to attend my event Yes No

PROPOSED BUDGET

Expenses:	
Location/Venue	\$
Food/ Beverages	\$
Printing (Tickets, Posters...)	\$
Prizes/ Awards	\$
Advertising/ Promotion	\$
Other (specify):	\$
Total	\$
Revenues:	
Donation Income	\$
Sponsorship Income	\$
Food and Beverage Sales	\$
Auction Income	\$
Ticket Sales	\$
Other (specify):	\$
Total	
Expected Net Revenue to Crossroads:	\$

Expected Date monies to be received by Crossroads: _____

Will you require Tax Receipts for this event*? Yes No

*Please Note: If you plan on offering Charitable Receipts for Income Tax Purposes, this must be pre-approved by Crossroads International. Receipts are issued according to Canada Revenue Agency (CRA) guidelines, available from their website at www.cra.gc.ca/charities.

All Publicity/Promotion Material must be approved by Crossroads before distribution. Crossroads International Logo cannot be used without permission

Please Return Form to:

Crossroads International | 49 Bathurst Street, Suite 201 | Toronto, ON M5V 2P2 |
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