

Community Fundraising Application Form

Thank you for fundraising for Symbiosis International!

Before you get started, please review our Symbiosis International Community Fundraising Guideline. When you're ready, complete this Application Form and forward it onto our fundraising team at communications@symbiosis-int.org

Once your application is received our fundraising committee will review it and you will be notified of the outcome within a fortnight of the date received. We will issue an *Authority to Fundraise* letter and once this is received, you can get started.

Note: Symbiosis International reserves the right not to be associated with fundraising that does not uphold our vision, mission, or values. We will decline an application, or withdraw our approval at any time, if it appears there is a likelihood of the fundraiser failing to adhere to any of the terms and conditions laid out in our authority to fundraise letter, fundraising guidelines or relevant laws.

Full Name: Organisation and Role (if applicable): Age: Address: Suburb: State and Postcode: Phone: Email: Website or social media (if applicable): Team Details Is someone helping you plan this fundraising activity or event? If yes, please provide the names, contact details, roles, and levels of involvement of other people involved:

Personal Details



Tell us your plans

Name of event:			
Date and Time:			
Venue Name:			
Venue Address:			
Suburb:			
State and Postcode:			
Size of Event:			
Why are you fundrai	sing?		
Please provide us with a basic ov	erview of your fundraising goals:		
Purpose	Raise funds for Symbiosis International		
	Raise the profile of Symbiosis International		
	Connect supporters of Symbiosis Internation	nal	
	Other:		
Focus Area			
rocus Area	Send funds to where they are needed most		
	Symbiosis Group Work		
	Health and Disability		
Costs	Education and Training		
If your fundraising activity incurs running costs, you should prepare and attach a Budget, which details your expected Income and Expenditure. Note the maximum percentage of expenses in relation to donation appeals should not exceed 30-40%. See fundraising guideline for budget template if required.			
Total estimated income:			
Total estimated costs:			
Estimated final proceeds:			
Will all proceeds come to Symbic	sis International ?	Yes	No
If no list other organisation/s an	d percentage split:		



How will you cover costs?

I will cover them myself
Ticket sales
I will receive third party sponsorship to cover the costs. If so, please give the organisations and names or groups you intend to seek sponsorship from.
Expenses will be deducted from gross proceeds
Other:

How will you collect funds?

I will create an online fundraising page with Grassrootz

I will create a social media fundraiser on Facebook

I will collect donations and deposit one lump sum into the Symbiosis International bank account

I will distribute and collect Symbiosis Giving Cards

Who is invited?

How will people know the event/activity is on?

Can we help you?

If we can lend a hand, please tell us how:

A Symbiosis Representative at the event

Use of Symbiosis name and logo

Symbiosis Resources (i.e., brochures or reports)

Symbiosis Giving Cards

Insurance and Legal:



Do you have insurance (e.g. public liability) for this If yes, please provide details:	s event?	Yes	No		
Do you require permits from the local council or g If yes, please provide details:	overnment?	Yes	No		
Will children under the age of 18 be participating i activity? If yes, please provide details:	n or attending your event or	Yes	No		
Acknowledgment					
I,	(Insert Fundraiser name)				
acknowledge that the information in this applicati	on is true and correct.				
I agree to comply with the Symbiosis International Fundraising Guidelines and all relevant laws associated with the planned activities. When conducting this fundraising activity, I agree to act in a manner that upholds Symbiosis Internationals reputation, ensuring all actions are aligned to the values of the organisation.					
I will take responsibility for all costs associated with this activity and provide an estimated budget outline for consideration. I will send all proceeds to Symbiosis International within 5 (five) business days of the conclusion of the fundraising event or activity.					
(If you are under 18 years of age, please have you	r parent or guardian sign this fo	orm on yo	our behalf)		
Signature:	Date:				
Name:					
Phone:	Email:				

Our Privacy Policy:

Symbiosis International is a registered charity, which engages in a number of activities including fundraising, marketing and events across Australia. Our Privacy Policy has been developed in accordance with the Australian Privacy Act (1988). This policy supports Symbiosis International's need to collect and handle personal information and the right of the individual to privacy. When we are required to collect personal information from children under the age of 18, we will seek consent from the parents/guardians for the collection of this information. To view our full privacy policy visit: **symbiosis.org.au/accountability**