

# GENERAL FUNDRAISING APPLICATION

Thank you for choosing Donor Mate to be the beneficiary of your fundraising activity. We greatly appreciate your support!

So we can find out more about your proposed activity and how you intend to raise funds, please fill in the form below.

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## ABOUT YOU

Contact name

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Group name

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Please provide if you are organising a fundraiser on behalf of your workplace, community group, sporting club or other organisation.

Group ABN (if applicable)

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Address

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Suburb

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State

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Postcode

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Daytime phone number

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Email address

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### PERTH

Suite 7, 272 Hay Street  
Subiaco 6008  
Western Australia  
Mate@DonorMate.org.au

### MELBOURNE

Parcel Locker 10018 88949  
727 Collins St  
Docklands VIC 3008  
VicMates@DonorMate.org.au

# ABOUT YOUR FUNDRAISING ACTIVITY

**Please tell us why you have chosen to raise funds for Donor Mate.** If your event is in memory of a friend or colleague please ensure you have the permission of their family to host the event prior to completing this application. Events without permission from family will not be approved.

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**Name of your activity?** e.g. Bob's Trivia Night, The Big Bike Ride, Bake Off Challenge etc.

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**Description of your activity**

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**Proposed date of your activity?** DD/MM/YY

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**Location of your activity?** If different from contact address details provided under 'About you'.

**How many people do you expect to attend?**

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**How will the funds be raised?** e.g. charging entry, auction, raffle, donation buckets, percentage of sale etc.

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**Will all proceeds go to Donor Mate?**  Yes  No If the answer was no, please list the other organisations that will benefit.

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I confirm that I have read, understood and agree to comply with Donor Mate's Fundraising Guidelines.

**Signature**

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The logo for Donor Mate, featuring the words "Donor Mate" in a stylized, handwritten-style font. The "D" is large and prominent, and the "Mate" is written in a similar cursive-like script.

## FUNDRAISING GUIDELINES

1. I understand that all fundraising activities must align with Donor Mate's values.
2. I confirm that my proposed fundraising activity complies with all relevant legislative and local government requirements and that all appropriate permits, licenses and insurance for fundraising in the state and/or territory where the activity is to be held will or have been obtained.
3. I will not exploit the position as a Community Fundraiser and/or the association with Donor Mate for personal gain.
4. I agree that all personal and sensitive information associated with the proposed fundraising activity will be handled in accordance with all relevant privacy legislation.
5. I agree to seek permission to use the Donor Mate name or logo on materials relating to the fundraising activity.
6. I give consent for photographs or other information I provide from the event to be published online or in publications by Donor Mate.