



FUNDRAISING FORM

Springhill Hospice

First Name:		Surname:	
Address:			
Postcode:		Telephone:	
Email:		Mobile:	
Place of Work:		Does your workplace offer matched funding? YES/NO	
Event:			
Date:		Time:	
Details: (please list details of the event eg., length, event type etc.,)			
Do you have a special reason for taking part in this event?			
Do you wish a representative of Springhill Hospice to attend? YES/NO			

Please provide the following support for this event

Sponsor Forms	YES/NO	Everyday Hero Online Sponsorship*	YES/NO
Posters	YES/NO	Hospice T-shirt (small, medium, large, xlarge)	YES/NO
Tickets	YES/NO	Publicity to promote/conclude event	YES/NO

* Everyday Hero is a website that enables you to set up a fundraising website allowing sponsors to donate online using Paypal and debit/credit cards. The money raised is sent straight to Springhill Hospice and does not require you to handle sponsor money or chase your sponsors.

If you would like the Hospice to set up an Everyday Hero account you will need to provide an email address above.

Declaration:

Sign: _____ **Date:** _____

By returning this form you are committing to raise funds for Springhill Hospice and forward the funds within one month of the event finishing.

Thank you for supporting Springhill Hospice

Registered charity no. 701798

DISCLAIMER AND INFORMATION FOR EVENT ORGANISERS

1. Springhill Hospice Public Liability Insurance only insures Springhill Hospice for events directly managed by its own employees.
2. Springhill Hospice Public Liability Insurance does not provide cover for events which are managed by other person(s) or organisation(s).
3. Your Liability in connection with the organisation of your event is not covered by the insurance of Springhill Hospice.
4. You are advised to take out your own public liability insurance to cover the public liability, and other risks, which you are running in connection with the event you are arranging.
5. You should conduct your own assessment of the risks associated with your event, and of the steps you need to take to eradicate or minimise those risks, and you should record identified risks in writing. Guidance on how to prepare a risk assessment can be found at 'www.hse.gov.uk/pubns/indg163.pdf'.
6. If you are in any doubt you are advised to seek independent legal advice about your legal liability in connection with the event that you are arranging, and to arrange for your own insurance against your public liability, and other risks.
7. Springhill Hospice, and its employees, are not authorised to advise on insurance products but may be able to supply the names of person(s) or organisation(s) qualified to give such advice.

I have read and understood the information provided to me in connection with

(Event Name) _____

(Event Venue & Date) _____

Name _____

Signature _____

Date _____



Springhill Hospice is a registered charity
number 701798

**Please return your completed form to
Fundraising Office, Springhill Hospice, Broad Lane Rochdale OL16 4PZ**