

Fundraising Agreement Form

Airedale NHS Foundation Trust Charitable Funds
 Charity Registration No. 1050730

Please return this form to: **Charity Fundraiser**
Airedale General Hospital
Skipton Road
Steeton
Keighley
West Yorkshire
BD20 6TD

Alternatively, email it to: **charitable.funds@anhst.nhs.uk**

Your name	
Your position (if you are fundraising as an organisation)	
Your home or organisation address	Postcode
Work telephone (if you are fundraising as an organisation)	
Home telephone	
Mobile number	
Email address	
Name of your fundraising event	
What will happen at your fundraising event	
Event will be raising money for (please tick)	Accident and Emergency [<input type="checkbox"/>] Endoscopy Appeal [<input type="checkbox"/>] Maternity Department [<input type="checkbox"/>] HODU [<input type="checkbox"/>] Children's Ward [<input type="checkbox"/>] Other ward area please state [<input type="checkbox"/>]
Thank you for choosing to raise money for Airedale NHS Foundation Trust Charitable Funds. What made you want to do this?	

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Date of proposed event	
Venue and address for proposed event	
Event details (how much would you like to raise, how will you raise money)	
Will you be using justgiving.com to fundraise	Yes [] name of the Justgiving page [_____] No []
Will you be organising a public collection	Yes [] have you contacted your local authority for a license [] No []
Do you require our logo	Yes [] what will it appear on [_____] No []
Things you may need	Please enter the number you require Collection tins [] Collection bucket [] Gift aid envelopes [] Sponsor forms []
Have you ever done anything like this before	
Will any other organisation benefit from your fundraising	Yes [] Name of organisation [_____] No []
Would you be happy for our communication team to share information about your fundraising	Yes [] No []
Will you be using twitter or Facebook to promote your fundraising event	Yes [] Facebook name [_____] Twitter name [_____] No []
Agreement	I have signed below to agree that all proceeds raised from the above mentioned event will be forwarded to Airedale NHS Foundation Trust Charitable Funds as soon as they are collected. Signed _____ Date _____