

# Fundraising Registration Form

Thank you for helping care for our Police Family. It's wonderful to have your support.

**Before you start, it's very important that we register your fundraiser, so please:**

- 1.** Complete this form in as much detail as you can | **2.** Wait to receive your Event ID and Authority to Fundraise Letter

## YES!

**I would like to fundraise for NSW Police Legacy**

Name \_\_\_\_\_

Email \_\_\_\_\_

Postal Address \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_

Postcode \_\_\_\_\_

Phone (Day time) \_\_\_\_\_

Mobile \_\_\_\_\_

*\*If you are under 18, please ask a parent/guardian/teacher to sign/submit this form on your behalf.*

Are you fundraising on behalf of an organisation?  Y  N

Name of organisation (if applicable) \_\_\_\_\_

\_\_\_\_\_

### My fundraising plans

I am planning the following fundraising event &/or activities

*(Please include the name of your event or activities (if you have one) and details of how money will be raised, e.g. entry fee of \$30; sale of cakes for \$5 each; sale of raffle tickets for \$10 each, etc.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This event/activities will:

**Start:** Date \_\_\_ / \_\_\_ / \_\_\_      **Finish:** Date \_\_\_ / \_\_\_ / \_\_\_

And take place at: *(Please give full address if different from above)*

Suburb \_\_\_\_\_

\_\_\_\_\_

State \_\_\_\_\_ Post Code \_\_\_\_\_

### My fundraising goal

I estimate that my planned fundraising activities will raise a total of

**\$** \_\_\_\_\_ for:

NSW Police Legacy

A specific member of the NSW Police Force

If you wish to fundraise for a member of the NSW Police Force please provide a paragraph about the member's current personal situation that has motivated you to initiate fundraising for them:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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## Expenses

- I/my organisation will cover expenses – I will not be taking the fundraising expenses from the fundraising revenue
- I will deduct fair and reasonable\* out of pocket expenses from my fundraising revenue. I will keep and provide a detailed record of any such expenses and understand that I may not deduct expenses from any donations I receive

\* Must be less than 40% of total revenue

If deducting expenses, I expect the total expenses for this event to be: \$ \_\_\_\_\_

Please list which items these expenses will be for, e.g. venue hire, food, drink etc.

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## My agreement

I \_\_\_\_\_  
(fundraising organiser) have read and agree to comply with NSW Police Legacy Terms and Conditions of Fundraising as detailed in full in the Guide for Successful Community Fundraising at [policel-egacynsw.org.au/support-us/fundraising/](http://policel-egacynsw.org.au/support-us/fundraising/). I therefore understand that NSW Police Legacy must receive all donations and fundraising proceeds within 14 days of event completion; that I must abide by all applicable laws; and that NSW Police Legacy is not responsible for any aspect of my fundraising activities.

Signed: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

Full name of adult supervisor (if applicable)

Phone \_\_\_\_\_

Email \_\_\_\_\_

- By ticking this box, I confirm I am willing to make the details of my fundraising activities known to the general public, including via NSW Police Legacy's website.

**Once the fundraising activities on this form have been approved, you will receive an Event ID and an Authority to Fundraise Letter.**

**Please return your completed form to us in one of the following ways:**

01. Email: [julia@policel-egacynsw.org.au](mailto:julia@policel-egacynsw.org.au)
02. Fax: 02 9283 7898
03. Mail: PO Box 20065, World Square NSW 2002

**THANK YOU  
FOR HELPING CARE  
FOR OUR POLICE FAMILY!**

For office use only:

Approved by: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_