

Group/Organisation \_\_\_\_\_

Contact Name Mr/Mrs/Ms \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone Day \_\_\_\_\_ Evening \_\_\_\_\_ Mob \_\_\_\_\_

email \_\_\_\_\_

Day/Date/Time of Event \_\_\_\_\_

Venue \_\_\_\_\_

Event details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like any of the following for your event?

		Quantity	Sent
Publicity	Yes / No		
A5 Flyers	Yes / No	<input type="text"/>	<input type="text"/>
A4 flyers	Yes / No	<input type="text"/>	<input type="text"/>
Tickets	Yes / No	<input type="text"/>	<input type="text"/>
Sponsor forms	Yes / No	<input type="text"/>	<input type="text"/>
Tins/Buckets	Yes / No	<input type="text"/>	<input type="text"/>
Hospice Literature	Yes / No	<input type="text"/>	<input type="text"/>

*For office use only*.....

DATE RECEIVED	BY	APPLICATION	PLEDGE NO	DATE OF EVENT
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Sum raised/Paid £ \_\_\_\_\_ Date \_\_\_\_\_ Receipt No \_\_\_\_\_

Subsequent amounts & Receipt Nos. \_\_\_\_\_

Date of Presentation \_\_\_\_\_ Donations via Just Giving \_\_\_\_\_