



# Host Registration Form

Thank you for your interest in raising funds to support Brave Foundation.

Your help will assist us “to build a village of acceptance and support around expecting and parenting teens.”

Please allow one week for your application to be approved. Once approved you will be sent a Letter of Authority to Fundraise and a unique Fundraiser ID.

<b>Personal Information</b>	
Full Name	
Company/Organisation Name	
E-mail address	
Business phone	
Home phone	
Mobile phone	
Website (if applicable)	
Position with Company/Organisation	
<b>Fundraising Event Details</b>	
Why would you like to raise funds for Brave Foundation?	
How did you hear about Brave Foundation?	
Title of fundraiser/ event:	
Proposed date of your fundraising event:	
Address/ venue of fundraising event:	
Estimated number attending:	
Fundraising Goal: \$	
How do you intend to promote your fundraiser / event:	
Provide a brief description of your Fundraising Activity/Event:	

I have read Brave Foundation's Fundraising Guidelines and understand the content. By ticking the box below I agree to conduct my fundraising activity in accordance with these Guidelines. I understand that Brave Foundation reserves its right to withdraw its approval at any time if Brave Foundation considers the fundraiser to be failing to adhere to the guidelines, written notification will be given. This agreement releases Brave Foundation from all liability relating to injuries or accidents that may occur direct or indirect from the fundraising activity. By ticking the box, I agree to hold Brave Foundation entirely free from any liability, including financial responsibility. I will not my exploit my position as a Village fundraiser and/or the association with Brave Foundation for personal gain. I agree that all personal and sensitive information associated with the proposed fundraising activity will be handled in accordance with all relevant privacy legislation.

I swear that I am participating voluntarily and verify that I am in proper physical and mental condition to participate in the fundraiser and acknowledge that I am aware of the risks involved and voluntarily agree to assume those risks.

I agree to conduct my fundraising event in accordance with those terms and conditions and in a manner which upholds the integrity, professionalism and values of Brave Foundation.

I have read and I agree to abide by the fundraising guidelines of Brave Foundation or from the event/fundraiser that is the subject of this application.

Tick Box

For persons under the age of 18 years the following parent/guardian consent must be completed.

I am the parent/guardian of the above-named ('Minor') who is under 18 years old. I have read this document and understand its contents, including the exclusion of statutory guarantees, warning, assumption of risk, release and indemnity, and have explained the contents to the Minor. I consent to the Minor conducting the fundraising activity at his or her own risk.

Tick Box (under 18 years)

Tick Box - I would like to receive Brave Branded Pens for my event

Tick Box - I would like to receive World's Biggest Baby Shower Balloons for my event

Email:

[wbbs@bravefoundation.org.au](mailto:wbbs@bravefoundation.org.au)