

## ALS Society of BC Third Party Fundraiser Registration Form

Thank you for your interest in supporting the ALS Society of BC through Third Party Event Fundraising.

Please complete this form at least one month prior to your event and return it to: **ALS Society of BC** 

FAX: 604-278-4257 EMAIL: info@alsbc.ca

GENERAL INFORMATION					
Sponsoring Agency/Individual/Organization:					
Contact Name:		tion.			
Address:					
City: Province:		ovince:	Postal Code:		
Day Telephone(s) #:					
Email Address:					
EVENT INFORMATION					
Name of Fundraising Activity:					
Date of Event:		Time:			
Location:					
Briefly Describe Fundraising Event/ Activity:					
Fundraising Goal:		# of Expected Partici	# of Expected Participants/Attendees:		
PROMOTIONAL MATERIALS					
The ALS Society of BC is pleased to make the following promotional materials and assistance available					
to you at no cost. Please circle the items of interest and <b>allow for approximately two weeks for delivery</b> . (pick-up is also an option)					
Donation Boxes		Donation Envelopes			
Cornflower Pins		ALS Society of BC Brochu	res		
Balloons		Pull Up Banner (MUST BE RETURNED TO ALSBC POST EVENT)			
VOLUNTEER ASSISTANCE					
Do you require event day volunteer support from ALSBC volunteers?Yes No					
SUBMITTED BY:					
Name		Signature	Date		
		0.80	2435		
DECEIVED BY:					
RECEIVED BY:					
	ALS BC STAFF MEMBER	Signature	Date		