



## Focus Ireland Fundraising Form

Name: \_\_\_\_\_

Organisation (if applicable): \_\_\_\_\_

Contact Address: \_\_\_\_\_

\_\_\_\_\_

Daytime Contact Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

How would you like to be contacted? \_\_\_\_\_

Type of fundraising event: \_\_\_\_\_

Date taking place: \_\_\_\_\_ Location: \_\_\_\_\_

Number of attendees expected: \_\_\_\_\_

Projected proceeds: \_\_\_\_\_

Are there any other beneficiaries to this event? Please name: \_\_\_\_\_

\_\_\_\_\_

If so, how will the funds be allocated? \_\_\_\_\_

Are you having a street collection or public raffle? \_\_\_\_\_ YES / NO

If yes, has a Garda permit been applied for and received? \_\_\_\_\_ YES / NO

Please indicate if you would like any of the following; please note there are substantial costs to Focus Ireland to produce these products, please be mindful of this when ordering quantities.

Quantity of t-shirts \_\_\_\_\_

Quantity of posters \_\_\_\_\_

Quantity of Sponsorship Forms \_\_\_\_\_

Quantity of Balloons \_\_\_\_\_

Information on Focus Ireland: \_\_\_\_\_



Please attach the names of two referees:

Name: _____	Name: _____
Affiliation: _____	Affiliation: _____
Address: _____	Address: _____
_____	_____
_____	_____
Tel: _____	Tel: _____
Email: _____	Email: _____

Do you want to subscribe to our ezine? \_\_\_\_\_

Have you supported Focus Ireland before? \_\_\_\_\_

**Declaration**

I declare that the information provided on this form is correct, and that **all proceeds from the event will be forwarded to Focus Ireland within six weeks of the event date.**

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

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**ID MUST BE PROVIDED BEFORE COLLECTION BOXES OR SPONSORSHIP FORMS WILL BE ISSUED**

\*\*\* please return the form either to [events@focusireland.ie](mailto:events@focusireland.ie) or post it back to Focus Ireland, 9-12 High Street, Christchurch, Dublin 8\*\*\*