



# SINGAPORE RED CROSS SOCIETY

INCORPORATED BY ACT OF PARLIAMENT SINGAPORE RED CROSS SOCIETY (INCORPORATION) ACT (CHAPTER 304)  
PATRON - HER EXCELLENCY THE PRESIDENT OF SINGAPORE

## THIRD PARTY FUNDRAISING REGISTRATION FORM

Thank you for choosing Singapore Red Cross (SRC) as the beneficiary of your fundraising activity. Please complete and return a signed copy of this form to the Fundraising Department to indicate your intention to be an external Red Cross fundraiser and obtain approval to proceed with your event. Upon approval, an agreement prepared by the SRC will be required to be signed prior to the beginning of your fundraising efforts.

### FUNDRAISER DETAILS:

Name:		Title: Mr/Mrs/Ms/Dr	
Name of school/company/organisation (if applicable):		UEN No:	
Address:		Postcode:	
Position held by event coordinator (if applicable):		NRIC No:	
Contact No:	(Office)	(Mobile)	Email:
Secondary Contact:	(Name)	(Mobile)	Email:

### DETAILS OF YOUR FUNDRAISING EVENT / ACTIVITY:

Please complete detailed proposal of your fundraising event in attached document

Name of the fundraising event / activity:

---

Date and Time of proposed fundraising event / activity :

---

Venue / Address of proposed fundraising event / activity:

---

Description and purpose of proposed fundraising event / activity:

<b>REQUEST FOR DONATION TINS / BOX:</b>		Please tick	Tins:	Box:
Type of Collection: Private / Public	Number of Tins / Boxes:		Small tin (14.5 x 10cm)	

Proposed Location for placement of donation tin: Cashier Counter / Entrance / Booth / Others:

Duration of Placement: From \_\_\_\_\_ to \_\_\_\_\_

I / We confirm our intention to help Singapore Red Cross in collecting funds for the above mentioned purpose

I / We, declare the information provided in this application are true to the best of my / our knowledge.

### Authorised Signature / Date / Company Stamp (if applicable)

#### RED CROSS INTERNAL USE ONLY

Received by & Date: \_\_\_\_\_ Fundraising Permit: No / Yes - Permit No: \_\_\_\_\_

Proceeds to be assigned to :  General Fund  Overseas Relief Fund Others: \_\_\_\_\_

Remarks / Program: \_\_\_\_\_ Approved / Rejected \_\_\_\_\_

Recommended by / Date (HOD) \_\_\_\_\_ Approved by / Date (SG / DSG) \_\_\_\_\_



# SINGAPORE RED CROSS SOCIETY

INCORPORATED BY ACT OF PARLIAMENT SINGAPORE RED CROSS SOCIETY (INCORPORATION) ACT (CHAPTER 304)  
PATRON - HER EXCELLENCY THE PRESIDENT OF SINGAPORE

## Third Party Fundraising Proposal Form

<b>Description/Mechanics of the fundraiser:</b> Eg: Sales of Books via online and physical platforms, please list)
<b>Method of fundraising (how will funds be raised):</b>
<b>Estimated number of participants &amp; Guest of Honour (if applicable):</b>
<b>Samples of promotional collaterals (if applicable):</b>
<b>Do you require any assistance/material from Singapore Red Cross?</b>
<b>What proportions of funds raised do you intend to donate to Singapore Red Cross?</b>
<b>Are there any other charities/non profit organization to benefit also from this event? (If so, please list)</b>
<b>Total estimated collection and cost. Details of expenditure (eg: Venue cost, Printing, Hire of equipment etc):</b>
<b>Estimated Net Revenue to be donated to Singapore Red Cross:</b>
<b>How donations derived are monitored/accounted?</b>

I / We confirm our intention to help Singapore Red Cross in collecting funds for the above mentioned purpose

I / We, declare the information provided in this application are true to the best of my / our knowledge.

---

**Authorised Signature / Date / Company Stamp (if applicable)**