



Because I Care (Canada) Children's Charity - Event Application Form

Name of Individual/Organization: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: _____ E-mail Address: _____

Event Name: _____ Event Date(s): _____

Event Location & Address: _____

Description of Event: _____

Do you require any involvement and/or support from Because I Care ("BIC")? If so, please provide details:

What benefits will BIC receive from this event?

Terms and Conditions:

- Submission of this application does not guarantee acceptance of the event by BIC.
- BIC must pre-approve all uses of its name and logo by the individual/organization.
- The individual/organization will donate the full amount of all proceeds raised on our behalf to BIC within 60 days following the event. BIC is not responsible for any financial losses.
- All actions taken by the individual/organization related to this event must uphold BIC's reputation.
- BIC may, at its sole discretion, attend the event.
- BIC may, at its sole discretion use any details of the event in the future for promotional purposes.

By signing below, I/We acknowledge having read, understood and agree to abide by the Terms and Conditions above.

Signature: _____ Date: _____

Please e-mail the completed Event Application Form to: info@becauseicarecanada.com