



Telephone: 604-842-1322

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kidzfirstcanada.org

Third Party Event Proposal Form

1. Name of organizer(s): _____
2. Company: _____
3. Address: _____
4. City: _____ Province: _____ Postal Code _____
5. Phone #: _____ Alternate #: _____
6. Email: _____ Fax #: _____

Tell us about your event.

7. Event Name: _____
8. Event Description: _____

9. Event Date: _____ Event Time: _____
10. Event Location: _____
11. How will you raise the money? (Ticket sales, raffle, donations, admission fees, etc.):

12. How will you promote the event? (Posters, flyers, radio, TV, newspaper, etc.):

13. How much money do you hope to raise? (Please estimate): \$ _____
14. What % of the proceeds will go to KidzFirst Canada?: _____

Thank you for your support!

Mark Mahl
Board Chair
KidzFirst Canada, Vancouver Chapter
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