Crohn's & Colitis New Zealand™ (CCNZ) Fundraising Guidelines

1 BECOMING A "CCNZ FUNDRAISER"

- Any person, organisation, group or other, fundraising in the name of the Crohn's and Colitis New Zealand[™] (CCNZ) needs to accept the following guidelines and register their fundraising activity with CCNZ.
 Please contact CCNZ if you have any questions we are here to help!
- Please read through these Guidelines, then complete and sign the Fundraising Offer Form accepting CCNZ's fundraising conditions.
- Return the Fundraising Offer Form to CCNZ. If your event is suitable, CCNZ will send you an authorisation letter or 'sanction' to fundraise on our behalf.
- The Fundraiser is not authorised to use CCNZ as its beneficiary charity until it has received the sanction letter.

2 FUNDRAISING FOR CCNZ

- Due to limited resources, CCNZ is not able to take a coordination role in your event, such as assistance with ticket sales, soliciting prizes or organising media personalities. The Event, including the financial aspects, fundraising, raffles, record keeping and management of the Event, shall be conducted in your (the Fundraiser's) name and is the sole responsibility of the Fundraiser.
- The Fundraiser's arrangements for the Event must be planned with the approval of CCNZ and CCNZ expects a reasonable level of liaison and information about the Event.
- Any significant changes made from the original details provided on the Fundraising Offer Form must be reported to CCNZ and may result in a new sanction to be authorised.
- CCNZ requires that there be no door-to-door appeals, street collections or telephone solicitation of any kind to the public in connection with the Event.

3 FINANCIAL ASPECTS OF THE EVENT

- Any expenditure involved with the conduct of your fundraiser and any disposition of funds & profits resulting from a fundraising appeal must be properly authorised by CCNZ beforehand.
- The Fundraiser must take all reasonable steps to ensure that the expenses do not exceed a fair and reasonable proportion of the gross proceeds obtained from the event. The Charitable Fundraising Act 1991 states this as expenses not exceeding 40% of the gross proceeds.
- The proceeds of the Event, the official sanction letter, and a statement of income and expenditure together with copies of receipts for all expenditure, are to be sent to CCNZ within 14 days of the conclusion of the Event.
- Individual receipts for tax deductions for supporters of the Event can be issued by CCNZ if that supporter makes a donation of \$2.00 or more to CCNZ. If supporters would like receipts, please send a list, including name, address, phone number, and donation amount. If the total of individual receipts exceeds 30 please provide CCNZ an electronic version of your register.
- When the supporter has received goods or services in return for money given (e.g. purchased raffle tickets or prizes at auction), a tax-deductible receipt cannot be issued.

4 DONATED GOODS AND SERVICES

• For donated goods and services, CCNZ requires correspondence from the company or individual stating the donated value of goods or services to the event. Accurate records of the donors' details assist CCNZ with financial reporting and thank you letters.

5 THE USE OF CCNZ'S NAME OR LOGO

- The Fundraiser cannot use the names CCNZ or Crohn's and Colitis New Zealand[™], nor is the Fundraiser given the right to raise funds in those names. This means you cannot call your event a CCNZ event i.e. CCNZ Trivia Night, however you can call it an event supporting CCNZ.
- The CCNZ Logo can be supplied and used by the fundraiser if prior permission is obtained from CCNZ.
- CCNZ can sanction the use of a line of copy stating the relationship between the Fundraiser and CCNZ for all fundraiser promotional material. Recommended wording would be, 'This event proudly supports Crohn's and Colitis New Zealand[™] or 'Funds raised will go towards support services for people with Inflammatory Bowel Disease'.

- Any printed materials or advertisements to be used by the Fundraiser in relation to the Event must be submitted to CCNZ for • approval and must also state how the proceeds from the event are to benefit CCNZ, e.g. 'all proceeds from this event will be donated to Crohn's and Colitis New Zealand[™] or '\$10 from every ticket sold will be donated to Crohn's and Colitis New Zealand™'.
- If the Fundraiser wishes to use the CCNZ Logo on any materials or products, the Fundraiser must obtain prior permission from CCNZ.

6 MEDIA AND PUBLIC RELATIONS

All media materials and press releases must be approved by CCNZ prior to circulation. Approval can be given within a day in most cases and we are happy to discuss any ideas you may have and provide an example press release.

7 PATIENT PROFILES & CASE STUDIES

CCNZ does not encourage the use of patient profiles or case studies in events or in the media in any way that would compromise their privacy. CCNZ will be the sole judge of this situation. Should you wish to include some stories in your promotional material the CCNZ Fundraising Manager will be able to provide you with appropriate material.

8 CELEBRITIES

- Any approach made to public personalities must be discussed with CCNZ prior to any contact being made. The Fundraiser must not approach celebrities using the name of CCNZ unless specific prior approval has been given by CCNZ.
- Unfortunately, CCNZ does not have a pool of Celebrities to draw from to send to your event. Any events that are lucky . enough to attract any celebrity, association has been through the celebrity's own choice and NOT through any preexisting commitment to CCNZ.

9 CCNZ REPRESENTATIVES

A CCNZ Representative may be arranged to attend your event. At least 3 weeks' notice is needed.

10 PERMITS

- Some activities require permits e.g. raffles where the total prize pool is over a certain amount.
- Permits are also required by councils and shopping centres for outdoor events.
- If you have any queries please contact the CCNZ Fundraising Manager.

11 LIABILITY

- All aspects of financial and public liability and public safety are the responsibility of the event organiser. As CCNZ is not the event organiser it does not cover any liability on your behalf.
- The Fundraiser agrees to release CCNZ to the fullest extent permissible under law for all claims, except where such liability arises because of the negligence of CCNZ or its agents. Therefore, please ensure that any space or venue used for your fundraising activities has the required public liability insurance.

12 CAUSE RELATED MARKETING POLICY (CRM)

- CRM is when a company/group with a product, image or service to market, builds a relationship or partnership with CCNZ for mutual benefit. Usually this involves the company donating a fixed amount or percentage of the unit sale price to CCNZ.
- All fundraising activities that involve selling products or services must be administered and marketed by the applicant.
- CCNZ reserves the right to refuse any offer of a CRM opportunity if it is not consistent with CCNZ's values and mission. • CCNZ does not enter into any CRM with start-up companies. Only businesses with an ABN will be considered.

If you have any questions about these guidelines, or fundraising for CCNZ (Camp Purple Live) in general, please contact us on campenguiries@crohnsandcolitis.org.nz

Thank you for supporting CCNZ I

Crohn's & Colitis New Zealand™ FUNDRAISING OFFER FORM

| Please complete and return a signed copy of this form to: | | | | | |
|--|------------------|-----------|--|--|--|
| Crohn's & Colitis New Zealand™ (Camp Purple Live) email: <u>info@crohnsandcolitis.org.nz</u> | | | | | |
| Please indicate what you would prefer your fundraising money to be allocated to: | | | | | |
| □ Camp Purple Live □ Crohn's & Colitis NZ | Charitable Trust | | | | |
| | | | | | |
| CONTACT DETAILS | | | | | |
| Name of Event Co-ordinator(s): | | | | | |
| Name of Company/Organisation (if applicable): | | | | | |
| Mailing Address: | State: | Postcode: | | | |
| Contact Phone:Mobile: | | | | | |
| Email: (please print clearly) | | | | | |
| | | | | | |
| EVENT DETAILS | | | | | |
| Name of Fundraiser Event/Activity: | | | | | |
| Description of fundraising activity: | | | | | |
| Date of Event/Time Frame of activity: | | | | | |
| How many people do you expect to attend the event? | | | | | |
| | | | | | |
| Venue and Address: | | | | | |
| FUNDS | | | | | |
| How will funds be raised? (e.g. all proceeds of raffle, auction items, ticket sales etc) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Estimated Donation: \$ _____

(This does not mean you are guaranteeing to raise this amount. It is simply an estimated figure)

EVENT HISTORY

Why did you choose CCNZ (or Camp Purple Live) as the beneficiary of your fundraiser?

How did you hear about CCNZ & Camp Purple Live?

CCNZ SUPPORT

Crohn's and Colitis New Zealand[™] would like to offer you as much support as possible. We have included a number of items to assist you with your fundraising. If you wish to request more items, please contact the Fundraising Manager, and we will then allocate accordingly.

Please send me: □ Brochures □ Posters

ESTIMATED BUDGET (Please adjust items applicable to your event)

This budget is only an ESTIMATE to assist you with your planning.

| Income | \$ amount | Expenses | \$ amount |
|--------------------------|-----------|------------------------|-----------|
| Sponsorship | | Venue Hire | |
| Registration Fees | | Food & Beverage | |
| Ticket Sales | | Printing & Advertising | |
| Donations | | Security | |
| Raffles | | Insurance | |
| Auctions | | Transport | |
| Other: | | Promotional Material | |
| | | Prizes | |
| Total Income | \$ | Total Expenses | \$ |
| | | Total Profit | \$ |
| | | (income-expenses) | |

(Fundraiser's name) offer to hold my Fundraising Event ١.

(Event Name) in accordance with those terms and conditions of

Crohn's and Colitis New Zealand[™] attached. I understand my obligations with regards to sending the proceeds raised to CCNZ within 14 days.

Signature:

Date:

If you are under 18 years of age, please have your parent/guardian/teacher sign this form on your behalf.

Name and relation (parent, teacher, guardian) of nominated adult supervisor:

Contact Phone: Mobile:

Email:

Disclaimer: Crohn's & Colitis New Zealand[™] (CCNZ) reserves its right to withdraw its approval for the fundraiser/ event at any time if it appears that there is a likelihood of the Fundraiser failing to adhere to any of the terms and conditions.

Thank you again for supporting CCNZ., Your commitment is greatly appreciated.





VOLUNTEER ACKNOWLEDGEMENT – FUNDRAISING

To be completed by individuals assisting at CCNZ

approved Fundraising Events. I understand that

- I will notify CCNZ if I intend to assist at any other CCNZ approved fundraising event.
- I am required to maintain the confidentiality of privileged information gained in the course, or after I have completed this fundraising event.
- I have a duty of care to ensure the safety of myself and any CCNZ stakeholders or members of the public at this event.

For insurance purposes, I declare that I am between the ages of 18 and 85 years of age.

Yes D No D If no, please discuss your involvement and entitlement to insurance cover with the Fundraising and Events Coordinator.

Name: _____

Address:

Telephone: _____