

# Third Party Fundraising Application Form

Please mail the completed form to the following address:

Dover Park Hospice, TTSH Integrated Care Hub, 1 Tan Tock Seng Link, Singapore 307382  
(E) [dph\\_fundraising@doverpark.sg](mailto:dph_fundraising@doverpark.sg) (T) 6500 7272 (F) 6254 7650



Thank you for your interest in raising funds for Dover Park Hospice (DPH). Please complete the below form and send it back to us 2 months prior to the intended date of event or appeal. Dover Park Hospice reserves the rights to withdraw support from the third-party event should the organizer(s) deviate from the approved application and plan. An **agreement must be endorsed and send to you before the start of your fundraising efforts.**

## Fundraiser Contact Details

Company / School : \_\_\_\_\_

Contact Person : \_\_\_\_\_

Designation (If applicable) : \_\_\_\_\_

Email Address : \_\_\_\_\_

Contact No.: (M) \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_

## Fundraising Information

Name of Event : \_\_\_\_\_

Period (Start and End Date) : \_\_\_\_\_ Venue (if applicable): \_\_\_\_\_

Purpose / Description of the Event : \_\_\_\_\_

Mode of Collection : \_\_\_\_\_

Please indicate the dollar amount or % of proceeds to be donated to Dover Park Hospice: \_\_\_\_\_

Expected date for the transfer of funds to Dover Park Hospice (dd/mm/yy): \_\_\_\_\_

## Additional Information

How will you fund your event? : \_\_\_\_\_

Describe your plans to publicize or market your event:

\_\_\_\_\_

Are there other charities involved? If 'Yes', please describe their involvement:

\_\_\_\_\_

Please describe what motivated you to organize this event?

\_\_\_\_\_

**I / We, read and agree with Dover Park Hospice's Terms and Conditions (please turn overleaf).**

Note: we will contact you to discuss your events and its fundraising possibilities within 7 working days of receiving this form.

\_\_\_\_\_  
Signature / Company Stamp (if applicable) & Date



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Please read below for Dover Park Hospice's Terms and Conditions.

- a. All community fundraising organizers/participants must complete the Dover Park Hospice's Third-Party Fundraising Application form before promoting the event and using Dover Park Hospice name.
- b. Dover Park Hospice is not able to take a coordinating role in planning for the event and cannot assist in soliciting prizes, auction items, organizing publicity or provide any goods & services to assist the Organizer in the running of the event.
- c. The Organizer is responsible for covering all expenses for the event as well as all bank charges for transmitting the proceeds/donations from the fundraising activity. Expenses will not be reimbursed by Dover Park Hospice.
- d. According to the Charities Regulations, that the cost for the event should not exceed 30% of the fund raised.
- e. Dover Park Hospice should be referred as the "Beneficiary of the fund raised" when describing the partnership between the fundraiser and Dover Park Hospice.
- f. If Dover Park Hospice is one of the many beneficiaries, the percentage (%) designated to Dover Park Hospice must be stated clearly in the materials.
- g. All donations by cheque should be made payable to "Dover Park Hospice".
- h. All outright donations are eligible for tax rebate accordingly to the prevailing rate. The Organizer may not offer any goods or services in exchange for a donation, as this will preclude the tax deductibility of the donation.
- i. When processing donations related to silent or live auction, proper documentation must be attached that states each item's fair market value. Dover Park Hospice will only issue tax receipt for the donation in the amount beyond fair market value. Payment must be directly to Dover Park Hospice.
- j. Creating and maintaining the attendee list from Dover Park Hospice Database for mailing and soliciting is not permitted.
- k. Any materials bearing the name or logo of Dover Park Hospice needs to be send to Dover Park Hospice for review before distribution.
- l. Third Party Event Organisers wishing to pursue corporate matching gifts from companies must be donated directly to Dover Park Hospice. It is the responsibility of the Organiser to make sure the companies with matching gifts are fully aware of this policy.
- m. Organizer(s) are aware and comply to the Personal Data Notice & Consent as listed below.

Relevant information may be disclosed to the authorities upon request, or as may be required by applicable law or regulation. By submitting this form, I hereby consent to allow Dover Park Hospice and its agents (collectively "DPH") to collect, use, disclose personal data about me to be updated with information about DPH and materials relating to outreach and fundraising events, campaign and activities either by postal mail and/or electronic transmission to my email address or to my telephone number(s) by way of Voice call / phone call, SMS/MMS (text messages) or fax. DPH's disclosure of the personal Data of individuals to any parties shall be in compliance with the PDPA. DPH will put in place reasonable security arrangements to ensure that the personal data of individuals is adequately protected and secured. Appropriate security arrangements will be taken to prevent any unauthorized access, collection, use, disclosure, copying, modification, leakage, loss, damage and/or alteration of such personal data. I hereby represent and warrant that I am the user and/or subscriber of the telephone number(s) provided by me above, and that I have read and understood the above provisions. If you have any questions relating tour collection, use and disclosure of your personal data or the matters set out in this document, you may contact our Office at [dpo@doverpark.org.sg](mailto:dpo@doverpark.org.sg).