

Fundraising registration form

Thank you very much for offering to support Tommy's, the baby charity. Tommy's aims to reduce the number of babies lost through premature birth, stillbirth and miscarriage, but we cannot achieve this without your help.

Please take a few minutes to complete this form and return it using either the address or fax number overleaf. This will help us to identify ways in which we can help to make your fundraising a great success.

Your details

Your Name _____

Address _____

Postcode _____

Telephone No (day) _____ (eve) _____

Mobile No _____

Email Address _____

If this is a Corporate Event please give the name of your company _____

Do you have any specific reason for supporting Tommy's, the baby charity?

Where did you hear about Tommy's?

Your event or planned fundraising

Date of event _____ Time _____

Name of event _____

Venue _____ Address _____

Would you like your event to be publicised on our website? Yes No

Please give a short description of your planned event _____

Ref no. _____

Materials

What materials do you require? Please indicate what you'll need, including quantities, in the table listed below.

Item	Quantity Required
Collection Boxes	
Balloons	
Tommy's Posters (A3) *	
Stickers	
Information Posters (A3)	
Literature on the Charity	
Sponsorship Forms	
T-shirts at £5 each, with cheques payable to Tommy's, the baby charity. Please state size S, M,(fitted) L, XL	

* Tommy's branded poster with space clear for you to enter your event details

Are there any other ways in which we may be able to help you?

Declaration

I understand that I should seek medical advice from my general practitioner if I am in any doubt about my physical ability to take part in this event. I acknowledge that I am undertaking this activity entirely at my own risk and that Tommy's, the baby charity, shall not be liable in any way for any injury or loss that might occur as a result of my participation. I understand that Tommy's will, in no way, be liable for any claim which may arise from this event.

I agree to pay all proceeds of the event to Tommy's.

Signed _____ Date _____

Printed Name _____

Parental/Guardian signature (required if under the age of 18) _____

Tommy's, the baby charity, will use your personal information to provide you with the information, services or products you have requested, for administration purposes and to further our charitable aims. We may need to share your information with our service providers, associated organisations and agents for these purposes.

We would like to keep you informed of our important work. Please tick this box if you would prefer **not** to receive information about the future activities of Tommy's.