Hamilton Food Share
339 Barton Street
Stoney Creek, ON L8E 2L2
Phone: (905) 664-9065
Fax: (905) 664-2108

EVENT AGREEMENT FORM

Please complete all sections below. Agreement is not valid until signed by both the sponsoring organization AND Hamilton Food Share.

Name of group/company planning the event:

_____

Contact Person: _____

Mailing Address: _____

City: _____ Postal Code: _____

Tel. Business: _____ Tel Home: _____ Fax: _____

Email: _____ Organization's Website: _____

Event Name: _____ Date: _____ Time: _____

Event Location and Address: _____

_____

Briefly describe the Event: _____

_____

Do you require written acknowledgement of this event from Hamilton Food Share?
Yes ☐ No ☐

Hamilton food share would be pleased to offer the support stated below where possible. What do you anticipate you might need?

- Printed background material relating to Hamilton Food Share.
- A copy of logo
- A representative from Hamilton Food Share to attend your event. *
- Other (please specify)

**** Please note this is not always possible and must be pre-approved by someone from Hamilton Food Share.***

Will you require tax receipts for this event? Yes ☐ No ☐

Offering tax receipts must be pre-approved by Hamilton Food Share. Tax receipts will be issued according to Canada Revenue Agency Guidelines. If a tax receipt is required a list must be submitted and include name, full address and tax receipt amount.

Will you be contacting media about this event? Yes ☐ No ☐
All materials being submitted to media must be pre-approved by Hamilton Food Share.

Please read the following:

- I acknowledge that Hamilton Food Share auditors may request verification of revenue from events being run on its behalf.
- Hamilton Food Share shall incur no costs or liability associated with this event.
- I agree to provide staffing and volunteers for this event.
- I agree to use my own mailing list for this event.
- I understand that I am responsible for all promotions and advertising of this event and that all materials must be approved by Hamilton Food Share prior to distribution.
- I understand and agree that any information on an individual, company or organization that I may collect or have access to will be handled in accordance with the Information Privacy Policy and Principles established by Hamilton Food Share.
- I understand and acknowledge that Hamilton Food Share reserve at any time the right to withdraw the use of its name and logo.
- I agree to submit the proceeds from my fundraising event to Hamilton Food Share.
- I understand that there is no guarantee that a representative from Hamilton Food Share will be able to attend.

By signing I acknowledge that I have read and understand the above statements.

Signed: _____

Date: _____

Please print your Name: _____

Please print your title: _____

Signed on behalf of:
(*name of organization)* _____

Signed on behalf of
Hamilton Food Share*:* _____
Linda Fraser, Community Event Co-ordinator

Date: _____

For Food Drives:
The Warehouse handles all elements of food drives. You will need to contact Mona Santucci our warehouse manager to inform her of the date, location and time of your food drive.
You can contact Mona directly at: mona@hamiltonfoodshare.org 905-664-9065 ext 233