



## Third Party Event Proposal Form

### 1. Contact Information

**Date Submitted:**

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

Street: \_\_\_\_\_

City/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about Houselink? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### 2. Event Details

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

Event Date: \_\_\_\_\_ Time: to: \_\_\_\_\_

Fundraising goal: \_\_\_\_\_

Venue: \_\_\_\_\_

Street: \_\_\_\_\_

City/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_



Please provide a brief description of the event and how it will raise funds/awareness in support of Houselink. If you require more space, please attach more information.

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### 3. Houselink's Role

What is the expected attendance at your event? \_\_\_\_\_

Do you require a Houselink representative to speak at your event? Yes  No

Please indicate what you will require from Houselink and, where applicable, amounts requested.

Logo  Annual Report  Brochures  Newsletters

Other (please specify) \_\_\_\_\_

Please complete form and return with any attachments by mail, email or fax to:

**Houselink Community Homes**  
**Attn: Fund Development Manager**  
**805 Bloor West**  
**Toronto, ON**  
**M6G 1L8**  
**Email: [lindsaysw@houselink.on.ca](mailto:lindsaysw@houselink.on.ca)**  
**Tel: 416-539-0690 ext 247**  
**Fax: 416-539-0693**

\*\*Please allow at least 10 to 12 business days for final approval of your