

**Cause Marketing Application Form**  
Canadian Breast Cancer Foundation – BC/Yukon Region

Thank you for helping us work toward a future without breast cancer. We appreciate your interest in raising awareness and funds for the Canadian Breast Cancer Foundation, BC/Yukon Region. Funds raised will be used for research and community projects, breast health information and awareness programs in our region. Please read and complete the following information and return it to us for approval.

Date of Application: \_\_\_\_\_

**I. CONTACT INFORMATION**

Name of Business/Organization: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Contact Numbers: Business: \_\_\_\_\_ Alternate: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Website: \_\_\_\_\_

**Brief Description of your Business/Organization:**

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

**When was your business established \*?** \_\_\_\_\_

**\*NOTE:** It is policy for the Canadian Breast Cancer Foundation to only partner with businesses that have been established for at least one fiscal year.

**Does your business operate/sell outside of BC/Yukon?**       Yes       No

If yes, where:  
\_\_\_\_\_



Have/are you supporting other not for profit organizations? If so, which ones?

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## II. CAUSE-MARKETING INITIATIVE

Brief Description of the concept for your Cause-Marketing campaign:

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What type of campaign are you hosting?  One time  Annual event  Other \_\_\_\_\_

Is this the first year of your campaign?  Yes  No

If no, please indicate previous beneficiary: \_\_\_\_\_

When will the campaign take place? Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Will sample items from the program be available to the Foundation for use as gifts in-kind?

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Would your company be interested in sponsorship opportunities?  Yes  No

How will funds be raised: *(please check all that apply)*

Proceeds of sales (10% minimum) \_\_\_\_\_%  Donation per item sold (\$/item: \_\_\_\_\_)

Web-based sales  Other \_\_\_\_\_

How will your products be sold/promoted?

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Will you be hosting any events outside product sales?  Yes  No

If so, provide a brief description

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**Will they include:**

**1. Gaming**

**Will you be engaging in any gaming activities?**     Raffle     50/50 Draws     Bingo  
 Other \_\_\_\_\_

**NOTE:** If there is to be any gaming activities at your event (i.e. raffle, bingo or 50/50 draw), a gaming license is required by law. The licensing process may take up to 10 days to complete. Application can be made online [www.pssg.gov.bc.ca/gaming](http://www.pssg.gov.bc.ca/gaming). Please contact the Gaming Office at **1-800-663-7867** to discuss your gaming proposal prior to applying. All funds raised through gaming activity must be reported to CBCF on the remittance form.

**2. Liquor**

**Will alcohol be served?**     Yes     No

**NOTE:** The Canadian Breast Cancer Foundation assumes no legal or financial liability associated with the event and will not take out liquor licenses for third-party events. For certain types of events, the Foundation may require the organizing committee to acquire their own insurance and provide proof if requested. Please consult your Foundation representative for more information.

**IV. PROJECTED FINANCIAL INFORMATION**

**Projected net donation to CBCF:** \$ \_\_\_\_\_

Proceeds from the funds donated will be sent to CBCF:

Monthly     Bi-Monthly     Quarterly     Bi-Yearly     Yearly (specify month): \_\_\_\_\_

**V. MARKETING INFORMATION**

**Who is responsible for the promotion** (internal, external)? \_\_\_\_\_

**How will this promotion be advertised?**  Locally     Regionally     Provincially     Nationally

**How will the Foundation be recognized on packaging/advertising/promotion? Is there an opportunity to include key breast health information on your packaging or at point of sale?**

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

**Do you require the use of the CBCF name and/or logos for promotional use?**

Yes     No    If yes, please specify:

\_\_\_\_\_

**NOTE:** CBCF must approve all documents and materials that make visual or verbal reference to the name, logo and/or official marks of the Foundation, in whole or in part, whether intended for print, broadcast, or online media (i.e. websites). This approval must be provided by the Foundation prior to the documents and materials being used publicly, regardless of whether the initiative is internal or external to a group or organization. Contact your Foundation representative for approval. This right cannot be assigned or transferred, can only be extended with written permission from the Foundation, and must be renewed each year the event is held.



**VI. FOUNDATION INFORMATION**

**Why did you choose the Foundation as the beneficiary of your program?**

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**Please outline your expectations for the Foundation's involvement and support of this program:**

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**How will you evaluate the success of this program? Would this information be made available to the Foundation?**

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**Other**

1. **Do you have an employee giving campaign at your office? If so, is it via United Way or other?** \_\_\_\_\_
2. **Would you like more information about our signature event The Canadian Breast Cancer Foundation CIBC Run for the Cure that happens the first Sunday in October across Canada?**       YES       No
3. **Would you be interested in a work place presentation i.e. Lunch N Learn to learn more about CBCF?**  
 YES       No

## Cause Marketing Terms and Conditions

We would like to ensure you understand both the extent and the limitations of the Foundation's support for cause marketing in the community. We are very grateful for your interest in supporting the cause. If you can't find what you need, please contact us at 604-683-2873 or via email (specific contact information is on the Cause Marketing Proposal Form).

### **GENERAL EVENT ITEMS**

#### **FOUNDATION INVOLVEMENT –**

Decisions around staff, speakers and/or volunteers attending will be determined at the discretion of Foundation staff based on factors such as availability, size and nature of the campaign or event, etc. We will not be able to provide speakers and volunteers to our smaller community events due to the accompanying time and resources required to secure them.

### **LEGAL ITEMS**

**LIABILITY** - The Canadian Breast Cancer Foundation assumes no legal or financial liability associated with the campaign. For certain types of events, the Foundation may require the organizing committee to acquire their own insurance and provide proof if requested. The Foundation may also require all participants to sign a liability waiver (provided by the Foundation).

**EVENTS WITH ALCOHOL** – To ensure both the Foundation and others involved are protected, organizers may be asked to provide copies of liquor license numbers for venues and/or special event permits (aka Special Occasion Permit or S.O.P.) to the Foundation. For events at a private home, the homeowner is responsible for any alcohol related liability. The Foundation will not take out liquor licenses for community events. The Canadian Breast Cancer Foundation assumes no legal or financial liability associated with the event and will not take out liquor licenses for third-party events. For certain types of events, the Foundation may require the organizing committee to acquire their own insurance and provide proof if requested. Please consult your Foundation representative for more information.

**GAMING**- If there is to be any gaming activities at your event (i.e. raffle, bingo or 50/50 draw), a gaming license is required by law. The licensing process may take up to 10 days to complete. Application can be made online: [www.pssg.gov.bc.ca/gaming](http://www.pssg.gov.bc.ca/gaming). Please contact the Gaming Office at 1-800-663-7867 to discuss your gaming proposal prior to applying.

### **FINANCIAL ITEMS**

**EXPENSES** – Any expenses must be paid directly through funds raised that are not eligible for tax receipts or by event organizers, and cannot be deducted from donations to the Foundation. The Foundation will not be responsible for any expenses.

**TAX RECEIPTS** - In accordance with our policy, the Foundation has full control over the issuing of tax receipts. The Foundation must also have the opportunity to review and approve any program-related tax receipt issues in advance of the program, to ensure conformity with federal regulations. Where a donation is eligible for a tax receipt, the cheque must be made payable directly to the Canadian Breast Cancer Foundation from the donating corporation or individual. The Foundation does not issue tax receipts for in-kind donations, auction items or sponsorships for any community events; we are happy to provide business receipts instead. Occasionally and only at the Foundation's discretion, tax receipts may be issued for a portion of ticket sales for a community event in which the fair market value of all benefits received by the purchaser is considerably less than the ticket price. All funds raised through community events as well as all corresponding donor contact information must be received by December 31 of the year of the event in order for the Foundation to issue a charitable tax receipt for that tax year.

**FINANCIAL CONTROLS** - The Foundation requires that the company/individual/group organizing the event or campaign is using satisfactory financial controls. The budget, financial records and bank information for the event must be available to the Foundation, if requested. The event or program should be financially viable in the opinion of the Foundation. All funds must be received by the Foundation no later than 30 days after the day of the campaign.

### **EVENT PROMOTION ITEMS**

**NAME AND LOGO USAGE** - The Foundation must approve all documents and materials that make visual or verbal reference to the name, logo and/or official marks of the Foundation, in whole or in part, whether intended for print, broadcast, or online media (i.e. websites). This approval must be provided by the Foundation prior to the documents and materials being used publicly, regardless of whether the initiative is internal or external to a group or organization. Approval from the Foundation gives you the right to use the Foundation's name and logo only as it relates to your community event. This right cannot be assigned or transferred, can only be extended with written permission from the Foundation, and must be renewed each year the event is held. The Foundation also reserves the right to revise any breast health information within promotional materials to ensure accuracy. The Foundation reserves the right to withhold the use of its name and/or logo from any event.

**AUCTION ITEMS**- All auction items donated to said event or campaign are to be held in trust for the Canadian Breast Cancer Foundation.

### **OTHER ITEMS**

**ACCEPTING OF PARTNERSHIPS** - The Canadian Breast Cancer Foundation seeks to ensure all projects are ethical and compatible with the Foundation's mission and values. The public perception of the activity must not be injurious to the Foundation. The Foundation will not accept gifts from tobacco companies. Gifts and/or partnerships are assessed against the region's gift acceptance policy framework.

**USE OF FUNDS** - Use of the funds received by the Canadian Breast Cancer Foundation from the event will be determined solely by the Foundation, in accordance with its mission.

**PHOTOS** – We appreciate receiving photos from your event or campaign. Any event photos submitted to the Foundation may be used by the Foundation to recognize your contribution and/or promote fundraising activities. By submitting them you are giving full permission for the Foundation to collect, use and disclose the photographs, electronic images and/or video images in any broadcast, telecast and/or written account of the event.

**TERMINATION CLAUSE** – The Foundation reserves the right to terminate any cause marketing partnerships at any time. Termination will be communicated in writing.

**ENDORSEMENT** - The Foundation is grateful for the strong support provided by all of our community events and their sponsors; however this acknowledgement does not constitute an endorsement of any companies' products or services used in connection with the event.

**PRIVACY**- The Canadian Breast Cancer Foundation respects your privacy and will never sell, trade, or loan your information to any other organization. Your information will only be used for follow-up contacts (such as newsletters), and to process and recognize your donations. Your information will only be disclosed to our own employees and agents and only to accomplish the purposes listed above. By providing this information you consent to our collection of the information



## Cause Marketing Support Form

(Please complete with Agreement)

Company/Campaign Name: \_\_\_\_\_

### CBCF SUPPORT MATERIALS\*

**What Foundation materials would be useful to your event?** (Please indicate quantities, where applicable)

- CBCF "In Support of" logo                       Pink satin ribbons #: \_\_\_\_\_  
 \*Breast health information #: \_\_\_\_\_                       \*Generic posters #: \_\_\_\_\_  
 Other (description) \_\_\_\_\_ #: \_\_\_\_\_

\*Availability varies based on items in stock

### CBCF WEB PAGE EVENT LISTING INFO

**Would you like the event listed on the BC/Yukon Region website?**     Yes                       No

If yes, please provide a brief written paragraph describing the event, including event date, time, location and how to purchase tickets/register. (100 words max)

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Event URL: (where applicable) \_\_\_\_\_

Contact Info to be listed on the website: \_\_\_\_\_

**Will you be providing any of the following for our website listing?** *Check all that applies and provide as attachment.*

- Event/Promo Photo     Logo (jpeg, .eps)                       Product Image  
 Other \_\_\_\_\_

URL page for product link: \_\_\_\_\_

Retail Price \$: \_\_\_\_\_ per unit

% or \$ donated to CBCF: \_\_\_\_\_

**Canadian Breast Cancer Foundation, BC/Yukon Region**

**CAUSE MARKETING LETTER OF INTENT**

By signing this Cause Marketing Letter of Intent, I \_\_\_\_\_ am verifying the information provided in this Application is valid and that I fully understand and will comply with the Terms and Conditions as outlined in this Application and Agreement. I understand that the Foundation will base their approval on the information provided in this Application. This information may be disclosed to employees and agents of the Foundation as necessary to perform this evaluation and any requested activities. I am aware that this information will be kept for seven years by the Foundation.

Signature of Campaign Organizer: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of CBCF Representative: \_\_\_\_\_ Date: \_\_\_\_\_

THANK YOU FOR YOUR APPLICATION.  
YOU WILL BE CONTACTED WITHIN 2-3 BUSINESS DAYS.

Mail or Fax the completed forms to:

Fund Development Officer  
Canadian Breast Cancer Foundation – BC/Yukon Region  
300-1090 West Pender Street  
Vancouver, BC V6E 2N7  
Fax: 604-683-2860

For any questions, please contact us at 604-683-2873.

**FOR OFFICE USE ONLY**

Campaign ID: AG \_\_\_\_\_ Appeal ID: BCCM or BVCM Appeal Package: \_\_\_\_\_

Fund ID: \_\_\_\_\_

RE ID: \_\_\_\_\_

Account Manager: \_\_\_\_\_