



SINGAPORE RED CROSS SOCIETY

INCORPORATED BY ACT OF PARLIAMENT SINGAPORE RED CROSS SOCIETY (INCORPORATION) ACT (CHAPTER 304)
PATRON - HER EXCELLENCY THE PRESIDENT OF SINGAPORE

To : Amy Distant
6664 0507 (Tel)
6336 0776 (Fax)
amy.distant@redcross.sg

ENDORSEMENT OF PARTICIPATION IN DONATION BOX PROGRAMME 2019 OF THE SINGAPORE RED CROSS

1 JANUARY TO 31 DECEMBER 2019

_____ hereby endorses its participation in the Donation
Box Programme 2019 of the Singapore Red Cross from _____ to _____.

Yes, my organisation would like to be acknowledge on Singapore Red Cross' website as an
official Donation Box Programme 2019 Partner

No, my organisation prefers not to be acknowledge on Singapore Red Cross' website as an
official Donation Box Programme 2019 Partner

Signature/Company Stamp

Name :
NRIC/FIN :
Designation :
Date :
Contact Person :
Contact Person's No :

Thank you for your support!
Please scan and email this completed form to Amy Distant at amy.distant@redcross.sg



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THIRD PARTY FUNDRAISING REGISTRATION FORM

Thank you for choosing Singapore Red Cross (SRC) as the beneficiary of your fundraising activity. Please complete and return a signed copy of this form to the Fundraising Department to indicate your intention to be an external Red Cross fundraiser and obtain approval to proceed with your event. Upon approval, an agreement prepared by the SRC will be required to be signed prior to the beginning of your fundraising efforts.

FUNDRAISER DETAILS:

Name:		Title: Mr/Mrs/Ms/Dr	
Name of school/company/organisation (if applicable):		UEN No:	
Address:		Postcode:	
Position held by event coordinator (if applicable):		NRIC No:	
Contact No:	(Office)	(Mobile)	Email:
Secondary Contact:	(Name)	(Mobile)	Email:

DETAILS OF YOUR FUNDRAISING EVENT / ACTIVITY:

Please complete detailed proposal of your fundraising event in attached document

Name of the fundraising event / activity:

Date and Time of proposed fundraising event / activity :

Venue / Address of proposed fundraising event / activity:

Description and purpose of proposed fundraising event / activity:

REQUEST FOR DONATION TINS / BOX:

Type of Collection: Private / Public	Number of Tins / Boxes:	Please tick	Tins:	Box:
			Small tin (14.5 x 10cm)	

Proposed Location for placement of donation tin: Cashier Counter / Entrance / Booth / Others:

Duration of Placement: From _____ to _____

I / We confirm our intention to help Singapore Red Cross in collecting funds for the above mentioned purpose

I / We, declare the information provided in this application are true to the best of my / our knowledge.

Authorised Signature / Date / Company Stamp (if applicable)

RED CROSS INTERNAL USE ONLY

Received by & Date: _____ Fundraising Permit: No / Yes - Permit No: _____

Proceeds to be assigned to : General Fund Overseas Relief Fund Others: _____

Remarks / Program: _____ Approved / Rejected _____

Recommended by / Date (HOD) _____ Approved by / Date (SG / DSG) _____



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Third Party Fundraising Proposal Form

Description/Mechanics of the event:
Method of fundraising (how will funds be raised):
Estimated number of participants & Guest of Honour (if applicable):
Samples of promotional collaterals (if applicable):
Do you require any assistance/material from Singapore Red Cross?
What proportions of funds raised do you intend to donate to Singapore Red Cross?
Are there any other charities/non profit organization to benefit also from this event? (If so, please list)
Total estimated collection and cost. Details of expenditure (eg: Venue cost, Printing, Hire of equipment etc):
Estimated Net Revenue to be donated to Singapore Red Cross:
How donations derived are monitored/accounted?

I / We confirm our intention to help Singapore Red Cross in collecting funds for the above mentioned purpose

I / We, declare the information provided in this application are true to the best of my / our knowledge.

Authorised Signature / Date / Company Stamp (if applicable)



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Terms and Conditions

1. Participants are to collect funds only when the "Collector's Certificate of Authority" (CCA) has been received from Singapore Red Cross Society (SRC) provided by National Council of Social Service (NCSS). The CCA should be produced upon request by any authorities.
2. All funds raised will proceed to SRC's local humanitarian services
3. Collection date of the donations from the Donation Box Programme will be set on every end of the year, unless a specific request is made by the Participant, subjected to SRC's approval. However, the participant can request for collection at any point of time, if the Donation Box is full.
4. Upon collection, donations will be transferred into a Donation Bag and secured with the Security Cable Tie. The entire collection will be handled by an SRC Fundraising staff, with the witnessing and acknowledgement by an appointed organisation staff.
5. Participants are strictly not allowed to open the Donation Box / Tin. Keys or any access to the Donation Box / Tin are to be surrendered and ONLY to be kept by SRC.
6. No counting of donations will be done on-site during the collection. Counting of donations will be done only in Red Cross House by a Fund-Raising staff together with a Finance staff as a verifier.
7. Stolen or loss of Donation Box / Tin must be reported immediately to SRC and a police report must be made. Copies of the police report will be given to the SRC.
8. Damage of Donation Box / Tin must be reported immediately to SRC and in cases where the Box / Tin is badly damaged and donation can be easily accessed, a police report must be made. Copies of the police report will be given to the SRC.
9. Participants must write in to SRC to notify the termination of the programme should they not wish to continue the Donation Box programme.
10. The Donation Box / Tin should be displayed at all times throughout the period of placement.
11. By signing this document, the Participant understands that the Donation Box / Tin must be under supervision, either by the CCTV or organisation personnel, at all times. The Participant will ensure that the necessary measures are put in place to ensure the security of the Donation Box / Tin throughout the period of placement.

I / We have read this Agreement and agree to the terms and conditions.

.....

Name / Signature

.....

Date / Company Stamp