



Ottawa Humane Society

Community Event Initiative Form of Intent



Community Initiative: An initiative organized by a business/individual to raise funds for another organization. (Also defined as a ‘third party initiative’)

Today's Date: _____
Initiative Name: _____
Start & End Dates of Initiative: From: _____ To: _____
Location/s of Initiative: _____
Primary Contact: _____
Organization (if applicable) _____
Phone #: Day: _____ Evening: _____ Fax: _____ Cell: _____
Email/s: _____
Address: _____ City: _____ Postal Code: _____
Secondary Contact: _____
Organization (if applicable) _____
Phone #: Day: _____ Evening: _____ Fax: _____ Cell: _____
Email/s: _____
Address: _____ City: _____ Postal Code: _____

Describe the details of your initiative (i.e. your business plan)

Describe how revenue will be generated (i.e. sponsorship, membership, % of sales, etc.)

Describe your projected costs (i.e. venue, rentals, food, prizes, entertainment, printing, etc.)

Budget

Preparation Time: (weeks, months, etc.) _____

Estimated Gross Revenue: _____

Estimated Costs: _____

Estimated Net Revenue: _____

Event Liability Insurance

If you (and/or) your organization are planning an activity that has the potential to cause bodily injury or property damage, you may be asked by the venue to obtain event liability insurance coverage or a certificate of insurance. You (and/or) your organization may wish to obtain event liability insurance or a certificate of insurance, even if they venue does not make a specific request. As the organizer/s, you are the person/s liable. We strongly urge you to discuss insurance coverage with you stakeholders (sponsors, committee members, etc.) and with the OHS Customer Service Representative – Events.

Do you require the following?

Tax Receipts? NO ___ YES __, please describe _____

Please refer to the Canada Revenue Agency regulations regarding Tax Receipts. It is important to discuss tax receipting issues with the OHS in order to determine whether we are able to issue tax receipts to donors. This ensures compliance with the Canada Revenue Agency Regulations.

Liquor License? NO ___ YES __, license under this person's name: _____

Lottery License? NO ___ YES __, license under this person's name: _____

Will you require police/traffic/security or road closures? YES ___ NO ___

St. John Ambulance? YES ___ NO ___

What sort of promotion and/or promotional materials will you be producing for your initiative?

Where will the OHS name/logo be used, if approved by our Outreach Department?

By signing below, you acknowledge that no materials (*nor any promotion of any kind*), using/ bearing the Ottawa Humane Society's name and/or logo will be printed without pre-approval from the OHS. Further, you acknowledge that the OHS must evaluate Community Forms of Intent prior to moving forward with any plans. Many initiatives will require a contract.

Signature of person responsible: _____

Date: _____

Signature or Ottawa Humane Society Representative: _____

Date Received: _____

Please fax, mail, or email this form to:

Bertha Norvor

Coordinator - Events

Ottawa Humane Society

Fax #: 613-725-5674

Phone #: 613-725-3166 ext 263

berthan@ottawahumane.ca

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