

Fundraising Application

Please complete this form in full and return to CDH UK.

Please note that all of the information provided will be treated with the strictest confidence and will comply with the data protection act 1998.

Applicant details Name: Address: Date of Birth: Contact Telephone No: Contact Email Address: Event details Please give a full description of your proposed event below (continue on a separate sheet if necessary).	Applicant dotaile					
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	(continue on a separate sheet if necessary).					

Event details cont'd					
Date & time of the event:					
Full Address of where the event will take place:					
What will you require in terms of fundraising materials/items (for example; balloons, labels, promotional materials) T-shirts are available in following colours and s					
tion example, balloons, labels, promotional materials,	Please enter your choice in the appropriate box.				
	iii iiie up	propridie	DOX.		
		PINK	BLUE		
	SMALL				
	MEDIUM				
	LARGE				
	X/LARGE				
Please provide any other information that you think is import	ant for us to	be awa	re of:		
How much are you hoping to raise? £					
Signature:					
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For further information or help with completing this form please contact:

The Committee, CDH UK, C/O The Denes, Lynn Road Tilney All Saints, Kings Lynn, Norfolk PE34 4RT Email: committee@cdhuk.org.uk

