




Event Proposal Form



Thank you for choosing to support MASS Action!

Please complete this form and email it to events@massaction.charity, at least ten days prior to your event date.



Main Event Holder Contact Information

First Name:

Street Address:

Last Name:

City:

Email:

Province:

Phone:

Postal Code:



Event Information

Event Name:

Street Address:

Date & Time:

City:

Venue Name:

Province:

Event Description:

Postal Code:

Estimated Donation to MASS £.....

Do you agree to submit donations from your event to MASS Action within two weeks of your event?

Yes ☐ No ☐

Do you understand and agree MASS Actions third-party fundraising guidelines?

Yes ☐ No ☐

Printed Name

Signature

Date: