

REGISTER YOUR FUNDRAISING



Whether you're organising a cake sale or a ball, please register your fundraising on the form below, so we can get in touch and discuss what support and fundraising materials you might need to make sure you enjoy your fundraising and that it's a huge success.

Under 18? Please ask a parent or guardian to sign it, and send it to: Freepost RRHG-UZRK-XLEE, Teenage Cancer Trust, 93 Newman Street, London, W1T 3EZ or email: hello@teenagecancertrust.org

If you're taking part in an active challenge event such as a run, triathlon, walk or skydive, please fill in our **Doing your own challenge** form instead.

ALL ABOUT YOU

Title: _____ **First Name:** _____ **Surname:** _____

Date of Birth: _____ **Email:** _____

Phone Type: Mobile/Home/Work _____ **Daytime Contact Number:** _____

Address Type: Home/Work

Address: _____

Postcode: _____

I am planning my fundraising...

- With family and friends At school, college or university
- At work. Please confirm name of employer: _____
- With my local club or group. Please confirm name of group or club: _____

ABOUT YOUR FUNDRAISING

1. Why have you decided to fundraise for Teenage Cancer Trust?

- a.** In memory of someone?
Were they supported by Teenage Cancer Trust? YES NO Prefer not to say
- b.** I have been inspired by a young person with cancer.
Were they supported by Teenage Cancer Trust? YES NO Prefer not to say
- c.** I have/had cancer?
Are/were you supported by Teenage Cancer Trust? YES NO Prefer not to say
- d.** I have been affected by cancer?
- e.** Teenage Cancer Trust is/was our Charity of the Year?

What is your organisation/group name? _____

f. I want to join friends and family who are also fundraising

g. I think it's a good cause?

h. Other (please specify) _____

We will keep a confidential record of your answer if you choose to tell us about your experience of cancer. We will take great care to safeguard this information, and process it according to the 1998 Data Protection Act.

2. How many fundraising activities are you taking part in to raise money for Teenage Cancer Trust?

One? More than one?

3. What type of activity are you doing?

4. We think it's important that we support you from start to finish on your fundraising. By letting us know when your fundraising starts and ends, we can make sure we give you all the help and encouragement you need.

Date of your activity ___ / ___ / ___

End date of activity if different from start ___ / ___ / ___

5. How much do you expect to raise?

Less than £1,000

Up to £5,000

Over £5,000

I don't know yet

FINALLY

Please let us know what prompted you to register your event today:

Social Media*

School/Education Talk

Other Media*

In My Local Community

Online Search Engine*

I saw you at an event

Website*

Music Event

Enewsletter

Teenage Cancer Trust Services

Postal Mailing

Through My Employer

Word of Mouth

Other*

*Please specify type: _____

Thank you for providing your contact details for communications about your fundraising. Teenage Cancer Trust would also like to keep you informed about our work and other ways you can support young people with cancer. We will only communicate with you if you tell us you are happy to hear from us. If you ever want to change the way we keep in touch, just let us know by emailing hello@teenagecancertrust.org or calling our Supporter Care team on 0207 612 0370.

I am happy to hear from Teenage Cancer Trust by:

E-mail

Post

SMS

Telephone

We know that your information and data needs to be kept safe, and we never give or sell any data or information to other charities or companies. For more information on how we use your data see our Privacy Policy on our website.

BE SAFE, BE LEGAL

If you wish to fundraise in aid of Teenage Cancer Trust you must agree to the following:

1. To read and abide by the contents of Teenage Cancer Trust's fundraising pack.
2. To only use lawful means to fundraise for Teenage Cancer Trust and not do anything that is likely to harm the participant's or charity's reputation.
3. To ensure that all money raised through fundraising activities in aid of Teenage Cancer Trust is paid to the charity within 30 days.
4. To be responsible for managing risk, organising insurance and obtaining the relevant permissions for all aspects of fundraising activities
5. To accept that Teenage Cancer Trust does not hold any responsibility for my fundraising activities and will not be held liable in any way.

I declare the information I have provided is true and understand and agree to the above.

Name: _____

Date: ____ / ____ / ____

Signature*: _____

On behalf of _____ who is under 18 years of age.

*If you are under the age of 18 a parent or guardian will need to sign the fundraising agreement on your behalf.

Parent/Guardian Contact Name: _____

Parent/Guardian Contact Number: _____

We will only use this number to contact you if we have any queries relating to the fundraising activity of the young person.

Please email this form to hello@teenagecancertrust.org or post to:

**FREEPOST RRHG-UZRK-XLEE
Teenage Cancer Trust
93 Newman Street
London
W1T 3EZ**

**020 7612 0370
hello@teenagecancertrust.org
www.teenagecancertrust.org**



Registered with
**FUNDRAISING
REGULATOR**