



**LA FONDATION ÉDUCATIONNELLE SOCRATE
THE SOCRATES EDUCATIONAL FOUNDATION
ΕΚΠΑΙΔΕΥΤΙΚΟ ΙΔΡΥΜΑ ΣΩΚΡΑΤΗΣ**

Third Party Event Proposal

Thank you for your interest in planning an event in support of the Socrates Educational Foundation (SEF). We rely on the involvement of individuals and organizations such as you to support the advancement of trilingual education. We look forward to exploring new ideas with you.

Before you begin organizing your event, please complete the event proposal form below and submit it by email for approval. If you have questions after you have reviewed the form please contact us at (514) 558-1599 or email at socratesef@gmail.com

The following is a partial list of criteria for all events held in support of the Socrates Educational Foundation.

- Does the event support the mission of the SEF?
- Does the event have a realistic budget and plan?
- What is the estimated amount of proceeds from the event?

Please note: The Socrates Educational Foundation is not able to obtain any licenses on behalf of the organizing group nor is it able to share any of its distribution lists.

CONTACT INFORMATION:

Name of organization planning the event: _____

Describe the organization:

- | | | |
|------------------------------------|--|--|
| <input type="checkbox"/> School | <input type="checkbox"/> Service Group | <input type="checkbox"/> Community Group |
| <input type="checkbox"/> Corporate | <input type="checkbox"/> Individual | <input type="checkbox"/> Other |

If other please specify:

Contact name: _____

Email: _____

Business Telephone: (_____) _____

Home Telephone: (_____) _____

Fax: (_____) _____

Mailing Address: _____

City: _____

Province: _____

Postal Code: _____

Are there other beneficiaries other than The SEF?
If so, which organization(s)

Please provide a brief description of your event:
(Attach separate sheet if necessary)

EVENT DESCRIPTION:

Event name: _____

Event date and time: _____

Location of the event: _____

Address of the event: _____

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This section deals with the budget for your event. Please work through this section carefully.

PROPOSED BUDGET:

This portion of the application is a planning tool intended to provide you with the best preparation for your event's success. It is not intended to be a formal financial statement but rather as a projection of your event's budget.

Revenue		Expenses		Donation Y / N
Participant revenue # ____ x \$ ____	\$	Location	\$	
Sponsorship	\$	Food / Beverage	\$	
Pledges	\$	Printing (tickets, posters, etc.)	\$	
Raffle	\$	Security	\$	
Auction	\$	Advertising	\$	
Other (describe)	\$	Entertainment	\$	
Total Revenue	\$	License Fees	\$	
		Prizes		
		Other (please specify)		
		Total Expenses	\$	
Net Revenue to the SEF	\$			

** All costs associated with the event are the responsibility of the organizing committee. Generally, these costs are covered by event proceeds. The Foundation will not be held responsible for costs incurred by event organizers related to the event.

The event organizer understands and agrees that the Foundation must review all promotional material (including press releases, public service announcements, scripts, posters, brochures etc.) BEFORE they are used.

Yes No

*NOTE: Your event's name may identify the relationship with the Foundation, such as "ABC School Bake Sale in support of the Socrates' Educational Foundation" but not incorporate the Foundation's name as in "The Socrates Educational Foundation Bake Sale".

The Foundation is pleased to provide tax receipts to eligible gifts made to the Foundation as a result of your event. Does your event require tax receipts be generated by the Foundation for donors?

Yes No

*NOTE: If you are unsure if your event is eligible for tax receipts contact us to inquire or visit Canada Revenue's guidelines online at <http://www.cra-arc.gc.ca>.

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The Foundation is able to promote your event through several channels. Please review the following list and check the boxes corresponding to the promotion the Foundation can do for your event:

- Displayed in 'Upcoming Events' Calendar of Foundation's website
- Displayed in 'Upcoming Events' section of The SEF's Facebook page

THE ORGANIZATION AND/OR PERSON SPONSORING THE EVENT ASSUMES ALL RISKS AND LIABILITIES ASSOCIATED WITH THE EVENT AND HEREBY RELEASES AND HOLDS HARMLESS THE SOCRATES EDUCATIONAL FOUNDATION, ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, SUCCESSORS, AND ASSIGNS FROM AND AGAINST ANY AND ALL CLAIMS, DAMAGES, LIABILITIES, COSTS AND EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEES, ARISING OUT OF OR WHICH MAY OCCUR IN CONJUNCTION WITH THE EVENT, INCLUDING WITHOUT LIMITATION, ANY PERSONAL INJURIES OR DAMAGE TO PROPERTY WHICH MAY OCCUR IN CONJUNCTION WITH THE EVENT.

I, _____, agree on behalf of _____ (name of organization) I represent, that if the project I wish to coordinate is approved by The SEF, we agree to abide by the information contained herein. It is also agreed that the funds raised from the activity will be remitted to The SEF within 30 days of the event or within alternative terms mutually agreed upon and stated below. I understand that The SEF name is not to be used until this project has been approved by The SEF and I have received a signed copy of this agreement.

Event Organizer Name (please print): _____

Signature: _____ Date: _____

Thank you for taking the time to fill out this application! A staff person from the Foundation will contact you within 7 days to follow-up on your application

For Office Use Only:

Date Received: _____ Received By: _____

- Approved
- Not Approved

Treasurer Signature: _____ Date: _____

President Signature: _____ Date: _____