

CAUSE MARKETING APPLICATION FORM

Thank you for choosing to raise funds for the Children's. Anyone intending to organize a cause marketing initiative benefitting the Montreal Children's Hospital must first obtain the Children's Foundation's approval by submitting a proposal through the Cause Marketing Application Form. Once the proposal is submitted, a representative will contact you within 5 to 7 business days to inform you of the next steps. If you encounter any issues with this form, please contact:

*mandatory

About your company

| *Company Name: |
|--|
| *Company Address: |
| *Date of Incorporation: |
| *Business Type: |
| *Company Mission: |
| *Primary Contact name: |
| *Primary Contact email: |
| *Primary Contact phone number: |
| Secondary Contact (if applicable): |
| Company Website: |
| Number of employees: |
| *Is the company privately held or public: Privately Public |
| Term of Commitment: |
| *Expected Donation (over term of commitment): |
| < \$1,000 |
| \$1,000 - \$5,000 |
| \$5,000 - \$10,000 |
| \$10,000 - \$25,000 |
| |



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Details of Initiative

| Why does your organization want to work with The Montreal Children's Hospital Foundation? |
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| Do you have a business plan? If so, will you share it with The Montreal Children's Hospital Foundation? |
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| Please describe what steps will be taken in the marketing/advertising of your initiative, including how our company name and logo will be used. |
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| Will you accept to provide The Montreal Children's Hospital Foundation an accounting of dollars raised relating to the support initiative? |
| ☐ Yes |
| No |

Important:

The Montreal Children's Hospital Foundation name and logo are the property of The Montreal Children's Hospital Foundation and can only be used with the Foundation's written permission. The applicant must obtain approval from the Foundation prior to proceeding with its initiative.