

WPT FUNDRAISING EVENT

PROPOSAL AND AGREEMENT

Full Name: _____

Organization Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Website Address (if applicable): _____

EVENT DETAILS

Name of Event: _____

Type of Event (i.e. carwash, etc): _____

Event Date (dd/mm/yy): ____/____/____ Time: _____ Est. # of Participants: _____

Event Address/Venue: _____

Do you have or intend to seek public liability insurance for your event? Yes No _____

Do you plan to hold your fundraising events for the WPT on an ongoing basis? Yes No Unsure

Please provide other relevant information about your fundraiser/event here: _____

How much do you aim to raise for the World Parrot Trust? \$ £ € _____

DISCLAIMER AND WAIVER

The World Parrot Trust reserves its right to withdraw its approval for the Fundraiser/event at any time if it appears that there is a likelihood of the Fundraiser failing to adhere to any of the above terms and conditions, and/or guidelines. In consideration of my application being accepted, I understand, intending to be legally bound for myself and my heirs, executor and administrators, waive and release the organizers and sponsors (individually and collectively), including the directors, officers, staff, volunteers and representatives thereof, and indemnify them against any liability (including liability for negligence) for the death or any physical or mental illness, incapacity of property damage or loss which I may suffer which may directly or indirectly result from my participation in the event/fundraiser. I further verify that I am in proper physical and mental condition to participate in the fundraiser and acknowledge that I am aware of the risks involved and voluntarily agree to assume those risks. It is UNDERSTOOD that the person receiving the release does so on behalf of each and every person and class of persons so released and that the said permission is given or shall be deemed to have been given by each such person and class of persons as consideration for my release.

I have read (have had read to me) this release and fully understand its terms and agree therewith.

Signature (or signature of Parent/Guardian if under 18): _____

Date: _____

Please return completed form to the WPT office nearest you:

U.K. & WORLD: World Parrot Trust | Glanmor House, Hayle, Cornwall TR27 4HB | Fax: +44 (0) 1736 751028

UNITED STATES: WPT-USA | P.O. Box 935 Lake Alfred, FL 33850 | Fax: 1-863-956-4347

CANADA: Canadian WPT | Suite 425, #9-3151 Lakeshore Rd. Kelowna, BC V1W 3S9 | Fax: 1-250-860-0848 (incl. Suite #)