

Collection Box Request Form

Please complete the front & back of this form to request one of our collection boxes



I would like a collection box for: use at an ev	vent use at a workplace
If you are collecting at an event, please tell u	us more about the event:
Surname:	Title: Mrs/Mr/Miss/Ms (Delete As Appropriate)
Forenames:	
0 /" 0 " 5 1 " /	
Company / if a Community Fundraiser (pa	lease leave blank):
	lease leave blank):
Address:	
Address:	Post Code:
Address:	
Address: Telephone (<i>Mobile</i>):	Post Code:
Address: Telephone (<i>Mobile</i>):	Post Code:(Home):



Collection Box

CODE OF FUNDRAISING PRACTICE AGREEMENT

Thank you

for kindly collecting on behalf of the Diabetes Research & Wellness Foundation. We very much appreciate your support.

É	Collectors MUST be 16 years of age or over and undertake their work in a manner which will maintain the high standing of Diabetes Research & Wellness Foundation (DRWF) and which in no way places undue pressure on donors.
É	Collectors MUST notify DRWF immediately if they have reason to believe that the contents of boxes are being pilfered or interfered with in any way.
Š	Collectors MUST return the certificate of authority to DRWF on ceasing to act as a collector or at any time on demand by DRWF.
É	Boxes MUST be emptied and the proceeds counted at least every 3 months (or when full) and reported to the Community Fundraiser at fundraising@drwf.org.uk .
Č	Contents of the box MUST be emptied and counted by the collector and witnessed.
Š	Before opening the box please ensure there has been no evidence of tampering and after emptying, please ensure the box is securely sealed again before re-siting it.
É	Please bank all proceeds from your boxes and send a cheque made payable to Diabetes Research & Wellness Foundation. Please post to the Community Fundraiser, DRWF, Building 6000, Langstone Technology Park, Havant, Hampshie, PO19 1SA.
Č	Once we have received your cheque you will be sent an official receipt, dated and stating the amount banked for you to display.
É	Collector MUST obtain written permission.
Š	Certificate of authority MUST be shown to site holder!
Ě	Procedures MUST not be varied.
	Signed:
	Name: Date:

Please make sure you understand the code of practice as detailed above and then sign date and return a copy of this agreement to the Community Fundraiser.