

REGISTRATION FORM

Use this form to register your fundraising activity, then email or fax it back to us so we can add you to our website as a 'Big Night In' Fundraiser!! Remember EVERY donation big or small counts and will help us to make a difference for Kiwi Kids living in poverty. Once completed, fax this form to us on 09 478 1523 or post to PO Box 31646, Milford, Auckland 0741. Email contactus@bignightin.co.nz



CONTACT DETAILS

Contact person:	Corporation / School:
Postal Address:	
Telephone (day):	Mobile:
Email: (required for receipt)	

ABOUT YOUR FUNDRAISING EVENT

Name of fundraising activity:
Location of activity:
Number of people expected to attend:
How much do you hope to raise for the 'Big Night In' Telethon? \$
Outline your fundraising activity: WHAT WILL YOU BE DOING TO RAISE FUNDS?
Do you require a copy of the Big Night In supporters' logo to promote your fundraising activity? Yes <input type="checkbox"/> No <input type="checkbox"/>
DECLARATION I understand that Big Night In Ltd cannot be held responsible for any personal injury, damage to property or financial losses that may occur as a result of the event/activity named above. I agree to pay Big Night In all money raised once the fundraising activity is complete.
Activity Organiser's signature: _____ Date of event: _____
<input type="checkbox"/> Please tick if you do not wish to receive information on KidsCan StandTall.

PAYING YOUR MONEY IN ONCE YOUR FUNDRAISING IS COMPLETE.

After your FUNdraising activity is complete here's how to **pay your money in before the 8th of August.**



Online at www.bignightin.co.nz



By Post. Please send a cheque made payable to 'Big Night In', PO Box 31646 Milford - Auckland 0741



Call The 'Big Night In' donation line on 0800 BNI 2009 to pay in your money by credit card



Direct credit to The 'Big Night In' account – ASB Bank: 12 3136 0244200 00



Take your money into any ASB branch nationwide and deposit into The 'Big Night In' bank account

DONATION FORM

I/we can't get involved in FUNdraising but would still like to make a donation to support Kiwi Kids

I am paying by: <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card
Name:
Address:
Telephone Number: _____ Email: _____
Donation Amount \$
Credit Card Number: _____ Expiry Date: _____
Name on Card:

contactus@bignightin.co.nz