



Club/Business Request For Donations

120, 251 Midpark Blvd SE, Calgary, AB T2X 1S3
Phone: 403.253.4411 • Toll Free: 1.877.463.6233
Fax: 403.252.5260 • info@albertaequestrian.com
albertaequestrian.com

This form must be completed and submitted to the AEF for all **non-monetary** requests.

All requests made must be submitted a **minimum** of 30 business days prior to the event date. A current AEF Club or Business Membership is required. Donations are subject to availability.

APPLICANT INFORMATION:

Name: _____

Address: _____

City: _____ Prov./Terr: _____ Postal Code: _____

Phone: _____ Email: _____

Please check one:

AEF Club Member AEF Business Member

Your Position or Role held with the club or business:

EVENT INFORMATION:

Event Name: _____

Event Location (Facility & Prov/Terr): _____

Date(s) of Event: _____ Date Items Required by: _____

Age Range of Participants (Select all that apply): Under 12 years 13- 18 years 19 - 30 years
 31 - 50 years 51 and over

Is AEF membership mandatory at this event? Yes No

EVENT DETAILS (Include as much detail as possible):

WHAT WILL DONATION BE USED FOR:

AEF RECOGNITION:

If your request for donation is approved, please indicate how the AEF will be recognized at the event (check all that apply - must select **minimum** 1 option):

- Tag us on Facebook and/or in the Facebook event (Alberta Equestrian Federation: @AlbertaEquestrian)
- Tag us on Instagram when posting about event (@Alberta_Equestrian)
- Use Alberta Equestrian Federation logo in applicable advertisements
(please contact info@albertaequestrian.com for a high-resolution copy of our logo and logo use policy)
- Refer **new** members to the AEF (if attendees are not members)
- Other: _____

DONATION ITEMS REQUESTED AND RETRIEVAL:

Educational Materials for: Coaching Competition Membership Equine Welfare
Promotional Items: Bags Pens Note Pads
Other: _____

Number of Items Requested: _____

If request is approved, Applicant agrees to:

- Pick up items at AEF Office – **CURBSIDE DURING COVID-19 – APPOINTMENT REQUIRED**
Office hours Monday – Friday 8:30 – 4:30 (Closed Weekends and Statutory Holidays)
- Pay for mailing of items. Payment is required before items can be mailed/shipped. AEF will contact you for payment information.

MAILING ADDRESS: Same as Applicant

Or send to: _____

AEF reserves the right to approve applications in part, in whole, or not at all. Completion of this form does not guarantee approval. Availability is based on several factors including budgetary constraints; the impact and value of donate items to the AEF Membership, etc.

OFFICE USE ONLY:

Date Received: _____

Items Approved:

Date Approved: _____ Approved by: _____

AEF Team Member completing order: _____