

## CONCORD REPATRIATION GENERAL HOSPITAL

### RAFFLE APPLICATION FORM



#### **Background Information**

Raffles can only be conducted for the purpose of raising funds for a non-profit organisation. Written approval must be obtained by the Marketing and Fundraising Department for all raffle activities and the appropriate raffle application form must be completed prior to the commencement of the raffle.

#### **What types of prizes may be offered?**

Prizes may include goods, wares, merchandise, services, and vouchers for goods or services that are not redeemable for spending money, tickets for admission to any entertainment and tickets for tours or journeys. The winner is only entitled to receive the prize won, and any prize cannot be exchanged for money.

A prize may consist of or include liquor within the meaning of the Liquor Act, 1982. Tickets for liquor prizes cannot be sold by or to a person under 18. Also a person under 18 cannot give or collect a liquor prize. A prize cannot consist of tobacco.

#### **Is there a maximum price per ticket?**

No. Whatever price is considered reasonable can be charged. Whatever selling price you charge must be applied to all tickets sold consistently.

#### **What is required of the ticket?**

Tickets need to consist of a purchaser's portion and a ticket butt. The purchaser's portion of the ticket must include the same serial number as the ticket butt, and are required to be numbered consecutively in the same series as the ticket.

#### **How should you advertise the raffle?**

When advertising the raffle, you should make the following information available to purchasers:

- The price of the ticket
- The name of the organisation / department for whom the raffle is being conducted
- Details of the prizes and their value
- The date, time and place of the draw
- Details of how the prize winners will be notified
- Details of the way in which the results of the draw will be publicized.

#### **Collection of funds**

Please note raffles conducted on hospital campus are classified as a hospital run activity and monies raised from such activities should be retained in hospital accounts. Further information will be provided by the Marketing & Fundraising Department upon lodgment of your raffle application form.

**Are there penalties?**

Yes. There is a range of penalties for conducting a raffle contrary to requirements, including:

- Failing to award the winner the prize
- Conducting the raffle fraudulently
- Misappropriating funds or prizes
- Making false statements

**Department:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Extension No.:** \_\_\_\_\_

**Reason for conducting Raffle:** \_\_\_\_\_

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**Date of Raffle draw:** \_\_\_\_\_

**Cost centre no. Funds are being attributed to:** \_\_\_\_\_

**Price of tickets:** \$ \_\_\_\_\_ per ticket

**1<sup>st</sup> Prize:**

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Prize	Estimated Value
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**2<sup>nd</sup> Prize:**

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Prize	Estimated Value
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**3<sup>rd</sup> Prize:**

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Prize	Estimated Value
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**4<sup>th</sup> Prize:**

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Prize	Estimated Value
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**5<sup>th</sup> Prize:**

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Prize	Estimated Value
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**APPLICANT:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**DEPARTMENT HEAD:**

**Recommended**

*Please Tick*

**Not Recommended**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**MARKETING & FUNDRAISING:**

**Approved**

*Please Tick*

**Not Approved**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FINANCE:**

**Application Sighted**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Please forward to Marketing and Fundraising Department for approval  
PRIOR to commencement of Raffle**

## RAFFLE CHECKLIST

This section will be returned to you after approval has been given to conduct a Raffle. The following information is requested, as all records are subject to inspection by Departmental inspectors or police officers.

Department: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Extension No.: \_\_\_\_\_

Number of Tickets sold: \_\_\_\_\_

Amount Raised: \_\_\_\_\_

Incurred Expenditure: \_\_\_\_\_

Cost centre no. Funds are being attributed to: \_\_\_\_\_

## WINNER DETAILS

### 1<sup>st</sup> Prize:

Name	Address	Contact Number
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### 2<sup>nd</sup> Prize:

Name	Address	Contact Number
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### 3<sup>rd</sup> Prize:

Name	Address	Contact Number
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### 4<sup>th</sup> Prize:

Name	Address	Contact Number
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### 5<sup>th</sup> Prize:

Name	Address	Contact Number
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**Please return Raffle Checklist to Marketing and Fundraising Department  
AFTER Raffle has been drawn**