

**Get
INVOLVED,
make a difference**

THROUGH RESEARCH



Physiotherapy
Research
Foundation

Fundraising Form

Contact details

First name	
Last name	
Organisation	
Email	
Phone	
State	

Activity details

Type of activity	
Activity name	
Date of activity	
What state	
Fundraising goal	\$
Fundraising expenses (estimate if unknown; food, printing, etc.)	
Describe the proposed event/activity (Please provide a detailed description of the event/activity, including number of participants, type of activity, publicity plans etc.)	
What motivated you to support the Physiotherapy Research Foundation?	
Have you read the Fundraising Terms & Conditions	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you read the Fundraising State Based Laws	Yes <input type="checkbox"/> No <input type="checkbox"/>

