**AUXILIARY POD BOOKING FORM 2021** 

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| --- | --- |
| **Auxiliary Name:** |  |

**Please confirm below your Auxiliary Stall Convenor:**

|  |  |
| --- | --- |
| **Name:** |  |
| **Contact Mobile:** |  |
| **Contact Email:** |  |

**This will be the person we contact if we have any questions or clarifications**

|  |  |
| --- | --- |
| **Please describe the goods that you most often sell (or propose to sell) on the Pods** |  |
|  |  |
| **Circle what percentage of your money raised will go to the RCH** | **100%**  |  |
| **60% rch – 40% aux** | **Less than 40%** |
| **On average, what is your daily taking goal (total funds raised per day) when you are on the Pods?** | **$** |

**Please select which option you would prefer for 2020 stall dates.**

|  |  |  |
| --- | --- | --- |
|  | **(SUBJECT TO AVAILABILITY)** | **Yes/No** |
| **Option 1** | **6 Pods up to once a month** |  |
| **Option 2** | **6 Pods more than once a month** |  |
| **Option 3** | **3 Pods up to twice a month** |  |
| **Option 4** | **Irregular dates listed below** |  |

**If your first choice is not available PLEASE let us know your second choice. Alternative option you would prefer for 2020 stall dates. eg. Any Monday, or every 3rd Tuesday or list individual dates.**

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Return this application form to the below address **at your earliest convenience before Thursday 31 October 2021.** To the following

Attn: Lucia Di Maio Attn: Ari Brown

Auxiliaries Liaison Officer Gratitude Hub Coordinator

lucia.dimaio@rch.org.au ari.brown@rch.org.au