

Example letter for written permission from the site holder

For a supply of headed paper contact the Volunteering Team on 01604 611681 or email volunteering@mndassociation.org

Dear xxxxx,

Thank you for agreeing to have an MND Association static collecting tin on your premises. We really are grateful for your kind support in helping us to raise funds and awareness in this way.

Our dedicated supporter (known as the 'Collector'), is presenting this letter to you, together with their ID badge to confirm they have permission to collect on our behalf.

They will be responsible for visiting you regularly to ensure all is well and to check that you are still happy with the arrangement. Should the tin require emptying before their next visit is due, or if for any reason you believe that the tin may have been tampered with, is lost or stolen, we ask that you please report this immediately to the Collector and they will inform the MND Association and the local police with immediate effect.

Once the money from the collecting tin has been paid into (Insert Branch and Group Name) by the Collector, you will be sent a receipt.

Thank you so much for the valuable support you are giving to those affected by MND. If you have any questions at all, please do let me know.

With best wishes,

(Insert Name)

(Insert Branch and Group Name)

Please read the following and confirm your approval by signing below:

I confirm my approval for an MND Association static collecting tin to be placed at my premises (details below) for a given period of time. If the tin becomes full and needs to be emptied prior to the visit, I am happy to contact the Collector direct to make the necessary arrangements. I understand I will contact the Collector should this agreement change at any time or if I require the tin to be removed. I also confirm that should I believe the tin to have been tampered with in any way, that I will inform the Collector, who will then inform the local police and the MND Association branch or group of this.

VENUE NAME:	TIN NO.:
CONTACT NAME:	TEL NO
ADDRESS:	
POSTCODE:	EMAIL:
Signature:	DATE:

PLEASE REMEMBER TO RETAIN A COPY FOR YOUR RECORDS AND GIVE A COPY TO THE SITE HOLDER