



# Hog Jog - Pork for a Cause - 2021 Run Submission Form

**SUBMISSION DEADLINE JANUARY 31, 2020**



### Hog Jog Objectives:

- An opportunity for the pork industry to give back to the community
- An opportunity to raise community awareness of the Cause
- An opportunity for the industry and community to interact in a fun activity
- An opportunity to celebrate our product

As a way of “giving back to the community”, a different Cause will be selected for the event each year. We are a small committee and representatives from the Cause are required to participate in the planning sessions and on race day in order to make the day a success. Proceeds from the event will be donated to the Cause selected for the year. The Hog Jog committee will solicit submissions that include: 1) a recommended Cause with a project for the funds outlined 2) details on resources available to assist us in the delivery of Hog Jog and 3) consideration of how Hog Jog can help increase awareness of the Cause in our community.

**Causes granted consideration must have a registered charitable number for tax purposes and we will base our selection on:**

1. The Cause represents an opportunity for the Ontario pork industry to GIVE BACK to its community.
2. The money raised will be used in Perth or surrounding counties.
3. The strength of the project outlined and potential for local impact.
4. The Cause has a need for increased AWARENESS within the community.
5. Support for the Cause will help to STRENGTHEN the community.
6. The Cause will be actively involved in the monthly planning sessions.

**Written submissions must be received by the Hog Jog committee by January 31, 2020.**

- All submissions will be reviewed by the committee.
- Be as specific and succinct as possible when describing your recommended Cause and how they meet OPIC’s selection criteria.
- Submit the completed form by email to [bmisener@southwestvets.ca](mailto:bmisener@southwestvets.ca)

### Cause:

Name of Charity/NFP: \_\_\_\_\_

Registered Charitable Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Website: \_\_\_\_\_

Email: \_\_\_\_\_

### Submitted By:

Name: \_\_\_\_\_

Company/Organization Position (if applicable): \_\_\_\_\_

Contact Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_



