

FUND-RAISER REQUEST FORM

(Fund-Raising Activities, School Service Projects and Community Service Projects)

Activity or Project _____

Sponsoring Group _____

Description of Fund-raiser _____

Purpose of Fund-raiser (How will these funds be used?) _____

Will there be open solicitation for donations, products or services? Yes ____ No ____

If yes: What type? _____

By whom? _____ How obtained? _____

Origin of sale items: Vendor _____ Contact _____

Address _____ City _____

State _____ Telephone _____

To whom will product or service be sold? _____

Will students be going door to door? Yes ____ No ____

Are awards, prizes or incentives being offered? Yes ____ No ____

If yes, what types? _____ Approximate values \$ _____

Fund-raiser starting date _____ Fund-raiser projected ending date _____

Anticipated net revenue \$ _____

Additional comments: _____

Form completed by _____ Title _____

Date submitted to principal and Superintendent _____

Principal's signature _____ Date _____

Superintendent's signature _____ Date _____

Athletic Director's signature _____ Date _____

