



School Sponsored Fund-Raising Request
(Must be submitted at least four weeks in advance of activity)

School: _____

Team/Activity Department: _____ Date: _____

1. Name or person or organization making request (relationship to organization):

2. Mailing address: _____

Telephone: _____

3. Purpose of Fund Raiser: _____

4. Amount expected to be raised: _____

5. Item to be sold to raise money (name and address of company providing product):

6. Date of Fund Raiser: _____

7. Additional comments: _____

8. _____

Signature of person making request

Date

9. _____

Signature of approval by Building Principle

Date