



Request to Hold Fundraising Activity

This form must be submitted to your School Governance Council for final approval.

School Name: _____

Organization Name: _____

Date(s) of Activity: _____

Description of Activity: _____

Anticipated Gross Sales/Revenues: \$ _____

Anticipated Expenses: \$ _____

Anticipated Net Profit: \$ _____

Specific Fund in School Activity Account into which funds raised will be deposited: _____

If Sales, how will the sale of merchandise be handled?

How are funds to be used from result of activity?

Printed Name of Person Responsible for Activity: _____

Signature: _____ Date Submitted: _____

Printed Name of Principal/Supervisor: _____

Approved/Denied: _____

Signature of Principal/Supervisor

Date Approved/Denied by School Governance Council: _____