

Fundraiser Application

Lead Contact - Name/Email/Phone:

Fundraiser (please provide as much detail possible)

Date(s)/Time(s):

Location:

If on campus, will you need the facilities outside of regular school hours (M-F, 8-4)

What are you raising money for? (circle one)

Class _____ (teacher name)

General Fund

Parent Council

What is your fundraising goal? (approx. amount)

What expenses do you anticipate? (approx. amount)

Will you be seeking reimbursement for your expenses? (circle)

YES OR NO

Have you been trained on our current cash handling procedures? (circle)

YES OR NO

Will you a cash bank from our business office? (circle)

YES OR NO

Additional notes/questions?

OFFICE USE ONLY

Community Liaison	Education Director