

# Fundraiser & Facility Use Application

*Applications need to be submitted 5 day in advance of date(s) requested to the Executive Assistant*

Circle or check the box for each selection

## General Information

CONTACT PERSON / NAME OF APPLICANT: \_\_\_\_\_

IDENTIFY YOURSELF AS ONE OF THE FOLLOWING (CIRCLE):

STAFF

TEACHER

PARENT/GUARDIAN

OTHER \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

## Event

PROPOSED TITLE OF FUNDRAISER: \_\_\_\_\_

RAISING FUNDS FOR: \_\_\_\_\_

BRIEF DESCRIPTION OF FUNDRAISER: \_\_\_\_\_

PROPOSED EVENT DATE(S): \_\_\_\_\_

PROPOSED TIME(S) OF EVENT: \_\_\_\_\_

I HAVE CHECK THE COMMUNITY CALENDAR FOR CONFLICTS WITH THIS EVENT (CIRCLE): Yes No

EXPLAIN ANY CONFLICTS AND HOW THEY WILL BE RESOLVED: \_\_\_\_\_

## Location

PROPOSED LOCATION (Circle): Blue Oak Campus Off Campus:

IF OFF CAMPUS PLEASE PROVIDE:

Name of location: \_\_\_\_\_

Address of location: \_\_\_\_\_

BLUE OAK CAMPUS (Complete only if requesting to use Blue Oak Facility/Campus):

ROOMS REQUESTED (Circle):

Great Room

Kitchen

Library

Classroom(s) # \_\_\_\_\_

Band/Meeting

Other: \_\_\_\_\_

ESTIMATED # OF PARTICIPANTS: \_\_\_\_\_

PLEASE CIRCLE ALL THAT APPLY:

Food will be served

Extension cords will be needed

Request help with setup

Request help with cleanup

Equipment needed: \_\_\_\_\_

Cash box

STAFF MEMBER RESPONSIBLE FOR LOCKUP: \_\_\_\_\_

**PROCEDURES FOR CLOSING THE SCHOOL**

- Ensure two people remain on campus.
- Walk the building and check the following:
  - ◆ Exterior doors are locked and closed tight
  - ◆ Lights are turned out
  - ◆ Food items have been disposed of properly
- Ensure front doors are locked upon your final exit
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Fundraising

**RAISING FUND FOR (Circle):**

General Fund      Parent Council      Library      Garden

Classroom fund (teacher name) \_\_\_\_\_

**FUNDRAISING GOAL (approx. amount):** \_\_\_\_\_

**EXPENSES AMOUNT YOU ANTICIPATE (approx. amount):** \_\_\_\_\_

**WILL REIMBURSEMENT FOR EXPENSES BE NEEDED (Circle):** Yes    No

(ALL PURCHASES MUST BE PREAPPROVED BEFORE REIMBURSEMENT)

**HAVE YOU BEEN TRAINED ON OUR CASH HANDLING PROCEDURES (Circle):**    Yes    No

**WILL YOU NEED A CASH BANK TO MAKE CHANGE (Circle)?**      Yes    No

**WILL YOU BE SEEKING DONATIONS FROM BUSINESSES (Circle):**    Yes    No

Solicitation of the larger community should be limited to those with a direct connection with the class. If a parent has a business, works for a business, or has a close personal connection with a business then these would qualify. Letters with the tax id will be issued directly from the front office. This will help us make sure we are coordinating fundraising efforts.

**IF YES, PLEASE LIST ALL BUSINESSES THAT WILL BE APPROACHED:**


**NOTE:** If a tax donation letter will be needed please provide the address, manager or contact person, date of donation, and description of donated items on a separate sheet of paper.

Publicity

All publicity items, order forms, event application or other affiliated documents/forms associated with your event must be approved by administration before they are posted on site, off site, and/or on social media.

**POSTER FOR APPROVAL HAS BEEN ATTACHED(Circle):**      Yes    No    Emailed

**ANY ADDITIONAL DOCUMENTS OR ORDER FORMS HAVE BEEN ATTACHED(Circle):** Yes No Emailed

**REQUEST PROMOTION OF EVENT (Circle all that apply):**

Website      Facebook      Instagram      Parent Square      ACORN

**WHO WILL BE LISTED AS THE CONTACT PERSON FOR QUESTION:**

**NAME:** \_\_\_\_\_ **CONTACT:** \_\_\_\_\_

**REQUEST EVENT BE SUBMITTED TO COMMUNITY CALENDARS OF APPROVED PUBLICATIONS**

**(Circle):**      Yes              NO

**NOTE:** In order to be submitted to community calendars such as Growing Up Chico, North State Magazine, and CN&R, application must be received and approved before the 10th of the month prior to the event.

**PRINT NEEDS:**      **SIZE** \_\_\_\_\_      **QUANTITY** \_\_\_\_\_

Please connect with the facilities manager for assistance regarding the appropriate way to affix posters to school surfaces. Masking tape is allowed, pushpins are only allowed in cork boards.

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My signature certifies that I shall be a responsible leader during this event. I will notify the appropriate administrative staff of any incidents and / or issues that occur during the event. I will lead my event attendees in upholding all school rules and policies. If the event is on campus I will make sure the procedures for closing the school are followed. I am aware that any cancellation of my event must be made at least 24 hours in advance.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **APPLICATION DATE:** \_\_\_\_\_

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**FOR OFFICE USE ONLY**

- School Calendar shows no conflicts with this request for use
- Event put on School Calendar
- Applicant notified

School Administrator Approval Signature \_\_\_\_\_ Date: \_\_\_\_\_