



REQUEST FOR APPROVAL OF FUND-RAISING ACTIVITY

Organization:

- Booster club or other school-support organization
- Parent-Teacher organization

Name of the sponsoring organization: _____

Name of the sponsor: _____

Campus: _____

Project: _____

Vendor: _____

Vendor's address: _____

Name of representative: _____

Date of project: _____

Length of project: _____

Expected profit: _____

Name of person who will be handling the project's money: _____

Purpose/Benefit to the school or District: _____

Scope of solicitations: _____

Sponsor's signature

Date

Principal's signature

Date

Superintendent's or designee's signature

Date

- Approved
- Denied