

FUNDRAISING ACTIVITY REQUEST FORM

Today's Date _____

Complete one form for each activity your class/club/organization is requesting.

Class/Club/Organization making request: _____

The above group requests permission to conduct the following activity in compliance with the regulations and policies of the FPCSD. All receipts and disbursements of funds will be made in accordance with the Central School Board Fund Raising Policy.

ACTIVITY PLANNED: _____

Indicate the appropriate category:

___ Fund raising event ___ Service Project ___ Other

Activity/Sale Dates Requested:

Begin _____ Time (if applicable) _____

End _____ Time (if applicable) _____

Class/Club/Organization Advisor(s) Signatures:

1. _____

2. _____

Project Chairperson Signature (if other than advisor):

The above named Class/Club/Organization understands the request of the above activity and assumes responsibility for its conduct.

Are chaperones required? ___ yes ___ no

If yes, list names:

___ Approved ___ Denied
___ Approved ___ Denied

Student Council: _____
Principal: _____