

\_\_\_\_\_  
School Name

## Request for Fundraising Activity

**Fundraiser requests must be submitted at least two (2) weeks prior to the date the fundraiser is to be held.**

**To:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Principal

**From:** \_\_\_\_\_  
Name of person making request Club/Program (Fund)

Approval of the following fundraising activity by this school is hereby requested:

Type of activity: \_\_\_\_\_

Dates to be held: \_\_\_\_\_

Estimated faculty time involved: \_\_\_\_\_

Total Amount to be Raised by Activity: \$ \_\_\_\_\_

Cost of Activity: \$ \_\_\_\_\_

Net Profit for Activity: \$ \_\_\_\_\_

Profit to be used for: \_\_\_\_\_

\_\_\_\_\_  
Requestor Signature

Approved: \_\_\_\_\_ Approved: \_\_\_\_\_  
Principal School Operations Manager