



APPLICATION FOR FUNDRAISING ACTIVITY/EVENT

Contact Information

Organization Requesting Approval for Fundraising Activity/Event:

Contact person: _____

Activity/Event Description

Date(s) of Fundraiser: Beginning _____ Ending _____

Description of fundraising activity/event:

Man-power requirement: Adults _____ Students _____

Fund raiser location: _____

Material/Equipment required: _____

Purpose of fundraiser: _____

Start-up cost: _____

Goal/Estimation of amount to be raised: _____

**ALL CHECKS MADE PAYABLE TO SACRED HEART JR. SR. HIGH SCHOOL
FOR SCHOOL SPONSORED EVENTS**

Requestor Signature

Signature: _____

Date: _____

For office use only:

Approval by school development committee-

John Krajicek, Principal _____

Bryce Woodall, Athletic Director _____

Renee Thompson, Fundraising Assistant _____

Amy Hernandez, Business Manager _____

Please complete and return to Renee Thompson to be added to the calendar. Fundraiser may only proceed once all 4 people above have approved.