

**Fund Raising Approval
Form 2025-2026**

Please turn in to your Building Principal/Supervisor by **September 19, 2025** Late requests should be turned in as soon as possible but no later than two weeks before the start of the fundraising activity.

Please complete all areas to the best of your ability, if you have any questions contact your building principal/supervisor.

Name of School: _____ Date Submitted: _____

Name of Sponsoring Group, Club, Class, Etc: _____

Name of Fundraiser Contact or Faculty Advisor: _____

Describe the fund-raising activity: _____

Start Date/Time: _____ End Date/Time: _____ Financial Goal: \$ _____

Repeats: No Daily Weekly Monthly Other

What will be done with the money raised? _____

In what account will receipts be kept? _____

I acknowledge I have read and understand the guidelines regarding fund-raising in the School District and agree to abide by all rules and regulations.

Signature of Fundraiser Contact or Faculty Advisor: _____

Principal Signature: _____ Approved: _____ Denied: _____

Superintendent Signature: _____ Approved: _____ Denied: _____