



# Team Fundraiser request form

This request automatically expires 1 year from date of approval and must be renewed each year.

Requestor: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Team: \_\_\_\_\_  
Age: \_\_\_\_\_

Name of Fundraiser: \_\_\_\_\_  
Dates of Fundraiser: \_\_\_\_\_  
Location of Fundraiser: \_\_\_\_\_  
Sales during Wed Dinner: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Purpose of raised funds: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Request Date: \_\_\_\_\_

Sports Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Board Approval: \_\_\_\_\_ Date: \_\_\_\_\_