

# Request Form for Fundraisers/Club Activities – Event – ON-CAMPUS

Organization: \_\_\_\_\_

Advisor/Coach/Contact: \_\_\_\_\_

Date of Fundraiser: From: \_\_\_\_\_ To: \_\_\_\_\_

IF FUNDRAISER IS AN EVENT: Start Time \_\_\_\_\_ End Time: \_\_\_\_\_

1. What is the fundraiser? \_\_\_\_\_
2. IS THERE FOOD AND BEVERAGE INVOLVED? \_\_\_\_\_
3. What will the proceeds fund? \_\_\_\_\_
4. List all food or beverage items sold, if any (e.g. candy, cookie dough, cakes, soda, water, etc.) (Attach Page if necessary)

Manufacturer	Food or Beverage

5. Who will you solicit? Students \_\_\_ Parents/Adults \_\_\_ School Staff \_\_\_ Other \_\_\_\_\_
6. Where will the fundraiser be conducted? \_\_\_\_\_
7. When will the fundraiser be conducted? Before/After School \_\_\_\_\_ During School \_\_\_\_\_  
Weekends \_\_\_\_\_
8. Check if you will promote the fundraiser through any or all options listed:  
Daily Announcements \_\_\_\_\_ Social Media \_\_\_\_\_, write 2 to 3 sentences that will be used for the actual post. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ADVISOR SIGNATURE \_\_\_\_\_ - I AM AWARE OF THIS FUNDRAISER. I HAVE READ THE CASH BOX/MONEY PROCEDURES MEMO AND THE HEALTHY FUNDRAISING GUIDELINES**

*(This section to be completed by administrator after meeting with the advisor)*

Does food meet the Connecticut Nutritional Standards? Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

Does beverage meet the requirements of state statute? Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

\_\_\_\_\_ Approval

Associate Principal's Signature