

# FHS FUNDRAISING FORM

**Team:** \_\_\_\_\_ **Level:** \_\_\_\_\_

Requested by	
Coach's Approval	(sign)
Date you wish to start	
Date completed	
Goal (amount)	

Describe the manner of fundraising you wish to do:

Please list the main reason why you are doing this:

- 1.
- 2.
- 3.
- 4.

List where the coach would like the money to be spent: (completed by coach):

- 1.
- 2.
- 3.

The person responsible for collecting the money and bringing it to the Foundation treasurer is:

- Rejected – You are not allowed to participate in fundraiser
- Approved by Athletic Director (initial)
- Approved by Student Council (initial) for \_\_\_\_\_(date)
- Approved by Principal (initial)