



Request for Fundraising Project/Event

Sport: _____ Date of Request: _____

Head Varsity Coach: _____

Team/Booster Club Parent: _____

Person responsible for turning in receipts to Booster Club Treasurer: _____

Project: _____

Dates of Activity: From: _____ To: _____

Vendor or Location of Fundraiser: _____

Selling Price of Item: _____ Purchase Cost of Item: _____

Estimated Profits: _____

Profits to be used for: _____

Signature Principal:

Date:

Signature AD:

Date:

Signature Booster President:

Date: