

FUNDRAISER APPROVAL FORM

CENTER FOR STUDENT LIFE AND LEADERSHIP CAÑADA COLLEGE

This form is to be used by ASCC recognized organizations to request approval to conduct an activity that involves fundraising or acquiring donations.

ORGANIZATION CONTACT INFORMATION

Requestor Name: _____

Phone: _____

E-mail: _____

Organization Name: _____

Organization Advisor: _____

Advisor Phone: _____

Advisor E-mail: _____

EVENT INFORMATION

Please check the box that best describes your fundraising activity:

- Sale (e.g., cake sales, cookies, foods (varied), arts and crafts)
- Service (e.g., car wash, sign making, projects)
- Entertainment (e.g., concerts, plays, movies, dance groups, mime troupes, bands, performers)
- Concession (e.g., game room, booths at special events)
- Contribution/Donation (e.g., donation collections, drawings, door prizes)
- Exhibit/Show (e.g., fashion shows, art exhibits)
- Collection Drive (e.g., recycling aluminum)
- Charity Drives (e.g., "walk-a-thon," collection drives)

Other: _____

Description of food being sold: _____

Please describe planned use for collected funds or goods: _____

Start Date: _____

End Date: _____

Location: _____

Has the location site been reserved? YES NO

Will your organization need a cash box? YES NO

RESPONSIBILITIES/CONDITIONS

By signing below I understand that I am agreeing to all policies and rules listed in the Guidelines for Food Sales as well as the Fundraising Policy. I also understand that any violation of those guidelines by me or any member of the organization or organization sponsoring this event may result in the forfeit of all future fundraising privileges.

Signature of Requestor _____

Date _____

Signature of Advisor _____

Date _____

Signature of Coordinator of Student Activities _____

Date: _____