Orland High School

Request for Fund-Raiser Application

All fundraiser applications must be submitted at least four (4) weeks prior to requested date. Applications must be fully completed. Incomplete applications will be returned. This form must have 4 required signatures for the fundraiser to be approved.

Fiscal Year: 2012-13	Date this form was completed: _	
Title of proposed event:		
Description of fund-raiser:		
Requesting Club/Organization	(s):	
❖ Club Advisor Approval	l:	
	Signature	Date
Date(s) of activity:	Alternate date(s):	
Time of activity: From	a.m./p.m. To:	a.m./p.m.
Location of activity:		
Facilities needed:		
 Site Secretary Approva 	al:	
	Signature	Date
Item(s) to be sold:		
Ticket selling price: \$		
Cash box required? Y	es or No Tickets required? Y	Yes or No
ASB purchase order re	equired? Yes or No	
Number of items purch	hased for sale: @ \$	each = \$
How much income is a	anticipated? \$How much expense	e is anticipated? \$
	al:	
· Non contain white	Signature	Date

Other Fundraising Event Information

On Site Adult Supervisor for Event:			
Supervisor contact number: Home		Cell	
Email	_		
All fundraising supervisors must be cle includes being fingerprinted through the student safety first and supervisors m	e county office.	Orland High Sca	hool and OUSD put
Status of Event (circle one): New Even	t Held Prev	viously (Years): _	
Budget Plan for Activity: (Attach Descripti	on)		
Other Background Information (such as oth	ner schools or cl	ubs that have hel	d similar events):
	' Review:Signature		 Date
Administrator Approval (circle one)	Yes	No	
Reason for disapproval, if applicable:			
Date presented to Student Council:			
Student Council Approval (circle one)	Yes	No	
Student Council Representative:	TOTAL TOTAL		
Sig	nature, Title		Date