FY 2008-2009
Gallatin County Schools
FUNDRAISING
REQUEST

NAME OF ORGANIZATION: Beta Club - H.S.

SCHOOL SPONSOR: Joe Deters

DATE OF REQUEST: 10/5/11 **DATE(S) SCHEDULED:** 10/25 - 11/7

Name of Company: Leukemia and Lymphoma Society

Address: 301 E. Main Street Louisville 40202

Phone Number: 502-584-8490 **Fax Number:**

DESCRIBE THE FUND RAISING ACTIVITY:

"Pennies for Patients" - Each classroom at the high school will collect money for "Pennies for Patients" program that benefits the

PERCENTAGE OF PROFITS: _____ **DATE OF SALE** _____

PRIZE PROGRAM: Pizza Party for class collecting most.

(APPROVAL OF FUND RAISING REQUEST MUST BE OBTAINED FROM THE BOARD OF EDUCATION BEFORE ANY FUNDRAISING ACTIVITY CAN TAKE PLACE).

SIGNATURE OF SPONSOR: [signature]

SIGNATURE OF PRINCIPAL: Roxanne Boot

(FOR BOARD USE ONLY)

DATE OF MEETING: _____ **SIGNATURE OF CHAIRPERSON:** _____