**FUNDRAISING REQUEST**

**Gallatin County Schools**

**NAME OF ORGANIZATION:**8th Grade Trip

**SCHOOL SPONSOR: Michelle Lawrence**

**DATE OF REQUEST: 2-29-12 DATE(S) SCHEDULED: 3/17/12-3/30/12**

**Name of Company: NA**

**Address: NA**

**Phone Number: 859-567-5860 Fax Number: 859-567-6107**

**DESCRIBE THE FUND RAISING ACTIVITY: Students attending the 8th grade trip will sell Little Ceasars Pizza Kits**

**PERCENTAGE OF PROFITS: 100% DATE OF SALE 3/17/12 – 3/30/12**

**PRIZE PROGRAM: None**

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

**SIGNATURE OF SPONSOR: Michelle Lawrence**

**SIGNATURE OF PRINCIPAL: Curt Bieger**

**(FOR BOARD USE ONLY)**

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**DATE OF MEETING: \_\_\_\_\_\_\_\_\_\_\_\_ CHAIRPERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUPERINTENDENT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**