

STUDENTS

09.33 AP.21

Fund-Raising Activities—Fund Raiser Request

NELSON COUNTY SCHOOLS
Fund Raiser Request

SCHOOL Thomas Nelson High School ☒ SCHOOLWIDE FUND RAISER

CLUB/GROUP Project Liftoff

SPONSOR(S) _____

FUND RAISING ACTIVITY Selling T-Shirts for seniors

DATE OF FUND RAISER: From MARCH 1ST to MARCH 31ST

LOCATION OF FUND RAISER:

☒ School

☐ Door-to-Door Sales (with accompanying adult)

☐ Business Community

☐ Local Business Property _____

Name of Business

☐ Other _____

Please specify

NAME OF COMPANY/ORGANIZATION Thomas Nelson High School

ADDRESS OF COMPANY/ORGANIZATION _____

TELEPHONE NUMBER OF BUSINESS _____

APPROXIMATE AMOUNT OF REVENUE TO BE RETAINED AT SCHOOL \$ _____

ANTICIPATED USE OF FUNDS _____

[Signature]
Sponsor's Signature

1/22/15
Date

[Signature]
Principal's Signature

1/23/15
Date

Superintendent/Designee's Signature

Date

To Be Completed by Central Office Designee

Schoolwide fund-raising activities require Board approval.

Check: ☐ Approved ☐ Disapproved Date of Board Action: _____ Order # _____

Review/Revised: 3/20/07