

Application for Fundraising Event

To be Completed and Signed by Club Advisor or Athletic Coach

Date: 2/6/18

Proposed Event: Ruby's Fundraiser

Description **and** Purpose of Fundraiser: 20% of sales @ Ruby's will go to support the DHS AVID Program

What will the money be used for? AVID Stickers & banners & fieldtrip

Where will money be deposited? ASU Dolphin Force

501(c)3 _____ (specify name) _____

Requesting Club/Organization: AVID ASU Acct.# 2610

Proposed Date(s) of Event: 2/7

Location of Proposed Activity: Ruby's SJC

Status of Event (circle one): New Event Held Previously (Years): _____

Other Background Information (such as other schools or clubs that have held similar events):
SJHHS AVID

Budget Plan for Activity (See Attachment)

Club Contact Person: Streza

Club Representative (signature, date) [Signature] 2/6/17

Club Advisor/Athletic Coach: Katrina Streza 2/6/17

Club Advisor/Athletic Coach (signature, date) [Signature]

Student Council Recommendation (circle)

Yes No

Student Council Representative (name, signature, date)

Bailey Hart, [Signature]

Principal or Designee Action (circle)

Yes No

Principal or Designee (name, signature, date)

[Signature] 2/19/18

3/27/18
[Signature]



RUBY'S DINER RESTAURANT

31781 Camino Capistrano,
San Juan Capistrano
(949) 496-RUBY

JOIN US TO CELEBRATE OUR FUNDRAISER AT
RUBY'S DINER & Sky Ranch Saloon

In San Juan Capistrano

20% OF ALL Food & Beverage Sales

(With This Flyer Presented) Will Be Donated To

AVID Program Fundraiser

WEDNESDAY, February 7TH, FROM 3:00PM – 9:00PM

**DON'T FORGET TO BRING THIS FLYER
WITH YOU!**

**FLYERS MUST BE PASSED OUT PRIOR TO YOUR FUNDRAISER AND
MAY NOT BE PASSED OUT AT THE RESTAURANT DURING THE EVENT.
OFFER IS VALID ON TO-GO ORDERS! (20% Offer Excludes Alcohol)**

"All the while, your school or organization benefits."

Revenue Potential (Fundraising Budget versus Actual Statement)

Name of School: DHHS

Name of Club: AVID

Revenue Potential/Fundraising Budget versus Actual Statement

Fiscal Year: 2017

Name of Event: Ruby's AVID

Date of Event: 2/7/18

Date Form Completed: 3/21/18

EXPECTED REVENUE:	BUDGET	ACTUAL	DIFFERENCE
Sales quantity x Sales price	\$	\$	\$
OTHER REVENUE:			
Donations, Sales of ads, etc.	\$	\$	\$
TOTAL REVENUE (A)	\$ <u>250?</u>	\$	\$
EXPENSES:			
Product quantity x Cost (per invoice)	\$ 0	\$	\$
OTHER EXPENSES:			
Freight	\$	\$	\$
Advertising	\$	\$	\$
Other	\$	\$	\$
TOTAL EXPENSES (B)	\$	\$	\$

OTHER: (C)			
Items Donated or Given as Prizes – Quantity x Cost	\$	\$	\$
TOTAL PROFIT (A-B-C)	\$	\$	\$

Submitted and Approved by:

Student Club Representative: MA

Signature, Title and Date

Club Advisor: MA JLR 3/21/18

Signature, Title and Date

Principal/School Administrator: _____

Signature, Title and Date

Recorded in ASB Student Council Minutes on: 3/27/18

Date