

Handwritten initials in red ink.

Application for Fundraising Event

To be Completed and Signed by Club Advisor or Athletic Coach

Date: 8/16/17

Proposed Event: clothing for the cause - (Misti Bloodcut)

Description **and** Purpose of Fundraiser: Clothing + textile drive
to raise funds for SOCSA + Instrumental Music

What will the money be used for? SOCSA + Band Coaches / instruments / music

Where will money be deposited? ASU Dolphin Force

501(c)3 (specify name) IMF

Requesting Club/Organization: IMF ASU Acct.# _____

Proposed Date(s) of Event: Sept 16th Saturday

Location of Proposed Activity: student parking lot

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

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

~~camp~~ DHS volleyball last year

Budget Plan for Activity (See Attachment)

Club Contact Person: Kimberly Martin VP of Band 2017

Club Representative (signature, date) Kimberly Martin

Club Advisor/Athletic Coach: _____

Club Advisor/Athletic Coach (signature, date) _____

Student Council Recommendation (circle) Yes No

Student Council Representative (name, signature, date) Bailey Hart 8/16/17

Principal or Designee Action (circle) Yes No

Principal or Designee (name, signature, date) [Signature] 8/16/17

Revenue Potential (Fundraising Budget versus Actual Statement)

Name of School: DHHS

Name of Club: _____

Revenue Potential/Fundraising Budget versus Actual Statement

Fiscal Year: _____

Name of Event: Clothing for the Cause

Date of Event: 9/17/17

Date Form Completed: 8/16/17

EXPECTED REVENUE:	BUDGET	ACTUAL	DIFFERENCE
Sales quantity x Sales price	\$	\$	\$
OTHER REVENUE:			
Donations, Sales of ads, etc.	\$	\$	\$
TOTAL REVENUE (A)	\$ <u>750 = 1000</u>	\$	\$
EXPENSES:	<u>split between SOCSA + IMF equally</u>		
Product quantity x Cost (per invoice)	\$	\$	\$
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: _____
Signature, Title and Date

Club Advisor: _____
Signature, Title and Date

Principal/School Administrator: _____
Signature, Title and Date

Recorded in ASB Student Council Minutes on: _____
Date