

RED BLUFF JOINT UNION HIGH SCHOOL DISTRICT

REQUEST FOR FUND RAISING ACTIVITY

Date: _____

Advisor: _____

Organization: _____

Date(s) of Events: _____

Explanation of Event (type of activity, type of merchandise, method of sales, purpose of funds).
Attach any proposed contracts or agreement.

Anticipated expenses for items purchased for resale: _____

Anticipated gross income: _____

Anticipated net profit: _____

Club Advisor Signature: _____ Date: _____

Approved by Student Gov't: _____ Date: _____

Approved by Principal: _____ Date: _____

If Athletic Related -

Approved by Athletic Director: _____ Date: _____

Approved by Title IX Coordinator/Designee: _____ Date: _____