

Hanover Park Regional High School District

Fundraising Approval Form

Organization name: _____

Requestor's name: _____

Requestor's email: _____

Requestor's phone: _____

Date of request: _____

Dates of Fundraiser: _____

Type of Fundraiser _____

- Will any students be asked to participate in this fundraising activity? Yes: ____ No: ____
- If any students will be asked to participate in this activity, please describe in detail what they will be asked to do.

Purpose of Fundraiser (Funds will be earmarked for :)

****Please attach any written literature/pamphlet or electronic communications related to this fundraiser.**

Signatures:

Requestor's Name: _____ Date: _____

Administrator in Charge of Activity: _____ Date: _____

Principal: _____ Date: _____

Superintendent: _____ Date: _____

Accepted: _____

Denied: _____

