

FUND-RAISING APPLICATION FORM

(This form is to be completed for each fund-raising activity being considered.)

- 1. Name of organization(s) making application Bee Fit Bottles
- 2. Person completing this form: Name Ann Meronek Leif Christianson
Address 6500 Alderson St.
Weston, WI 54476
Phone No. 715-359-6561, Ext 4424
- 3. How much money does your organization plan to raise with this fund-raising activity? not a fund raising company
- 4. How do you plan to raise the money? Sell water bottles with coupons for free activities from various businesses that deal with fitness
- 5. Can you ensure the administration that no direct solicitation of students/teachers at school will be used to raise this money? Yes No
- 6. Do you plan to use either the implied or actual name of a school district organization or the school district in general in raising money? Yes No
If so, in what context? _____
- 7. Will your fund-raising activity include direct solicitation of businesses, service clubs, or other organizations in our community? Yes No
If so, which ones? Fitness, Wellness, Athletic
- 8. Do you plan to advertise the activity in the newspaper, radio, or in other means? Yes No
If so, how? Face-to-face, posters, facebook, twitter
- 9. Will alcoholic beverages be served or sold during the fund-raising activity? Yes No
- 10. Where does your organization plan to deposit the money that is raised? Brokaw Credit Union
- 11. What are the names of the school personnel with whom you plan to deal in making financial gifts to the school?
NA - funds distributed to class participants
- 12. During what period of time (days, weeks, months) do you plan to conduct this fund-raiser?
until June - May 30, 2011 - Daily

This Fund-Raising Application Form has been reviewed and approved by the following people:

4/11/11
Date

4/13/11
Date

Date

[Signature]
Building Principal

[Signature]
Superintendent of Schools

Board of Education

When a copy of this form has been returned to the person making the application, the fund-raising activity will be placed on the school calendar. Local businesses being solicited may request to see a copy of this approved form.

Exhibit Approved: 9-13-83
Exhibit Revised: 10-28-97
RWD:lk

BOARD OF EDUCATION
D.C. Everest Area School District
6300 Alderson Street
Schofield, Wisconsin 54476