

FUND-RAISING APPLICATION FORM

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

- Name of organization(s) making application Middle School Student Council
- Person completing this form: Name Jamie Salzman
Address DCEMS
Phone No. 241-9700 (2239)
- How much money does your organization plan to raise with this fund-raising activity? -\$5000?
- How do you plan to raise the money? Magazine Sale
- Can you ensure the administration that no direct solicitation of students/teachers at school will be used to raise this money? Yes No
- 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? The funds will support student activities
- Will your fund-raising activity include direct solicitation of businesses, service clubs, or other organizations in our community? Yes No
If so, which ones? Possibly medical offices, car repair
- Do you plan to advertise the activity in the newspaper, radio, or in other means? Yes No shopset
If so, how? _____
- Will alcoholic beverages be served or sold during the fund-raising activity? Yes No
- Where does your organization plan to deposit the money that is raised? SAF
- What are the names of the school personnel with whom you plan to deal in making financial gifts to the school? Casey Nye, Jodi Devine, Jamie Salzman
- During what period of time (days, weeks, months) do you plan to conduct this fund-raiser? September - October

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

9/4/09
Date
9/8/09
Date
Date

[Signature]
Building Principal
Kustine A Fortune
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.