

ALEXANDRIA CENTRAL SCHOOL FUNDRAISING

ACTIVITY REQUEST FORM

Today's Date: _____ (Fill out one form for each activity requested)

Class/Club/Organization making request: _____

The above group is requesting permission to conduct the following activity in compliance with the extra classroom activity procedures, regulations and policies of the Alexandria Central School. All receipts and disbursements of funds will be made in accordance with the Alexandria Central School procedures, regulations and policies.

Activity Planned: _____

Indicate the appropriate category: _____ Fundraising Event _____ Service Project _____ Other _____

Activity/Sales Date(s): Begin _____ End _____

EXPENSES (Costs)

1. _____
2. _____
3. _____
4. _____
5. _____

Projected

- \$ _____
\$ _____
\$ _____
\$ _____
\$ _____

RECEIPTS (Income)

1. _____
2. _____

- \$ _____
\$ _____

PROFITS (Receipts minus Expenses)

\$ _____

Are Chaperones Required? _____ Yes _____ No

If Yes, list names of Chaperones:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

The student offices of the above named Class/Club/Organization understand the request of the above activity and assume responsibility for its fiscal conduct.

Class/Club/Organization Advisor: _____

Signature

_____ Date

Student Treasurer: _____

Signature

_____ Date

Building Principal: _____

Signature

_____ Date

Superintendent: _____

Signature

_____ Date

****After the activity/sale: record on the back of this form the names of students who have not turned in money and the amount. Give a copy of this form (front and back) to the Central Treasurer.