

Oak Ridge Schools – Fundraiser Authorization

Group/Organization requesting permission: _____

Does club have a Booster Organization, if yes, name: _____

Will Group/Organization receive school equipment and materials as part of school budget: _____

Date(s) of Fundraiser: Begin _____ End _____

Who will be involved in fundraising activity (9th grade students, parents, etc): _____

Number Participating: _____

Proposed Fundraising Activity: _____

Purpose/Need of Fundraising Activity: _____

Vendor Contact attached (if applicable): Yes _____ No _____

Where will activity take place? _____

Method of Selling (mall, school lobby, etc.): _____

Educational Value of Activity: _____

Method by which school/SSO will receive profit: _____

Margin of Profit (if applicable): _____

Current Balance of Fund Account: \$ _____ Date: _____

Requested By: _____ Phone: _____

Approved by:

Athletic Coach: _____ Date: _____

Athletic Director: _____ Date: _____

Building Principal: _____ Date: _____

Exec. Dir. of School Leadership: _____ Date: _____

Note: This form is to be used for requests under items 3 and 4 in Administrative Bulletin No. 28 on Fundraising through School Activities.