



# REQUEST FOR APPROVAL OF FUNDRAISING ACTIVITY AND PARENT DISCLOSURE

Application Date: 8/17/20 Name of Team or Organization: Ballroom  
 Advisor/Coach: Lexus Gordon School: SHS  
 Type of fundraising activity:  Team/Group/Organization -OR-  Individual Students  
 Name of Fundraiser: sky hawk cards  
 Fundraiser Begin Date: 8/17/20 Fundraiser End Date: 8/24/20  
 Proceed Percentage Applied to Program: 100 % Proceed Percentage Applied to Student: \_\_\_\_\_ %

Identify the specific financial needs of the team/organization/individuals to be satisfied by this fundraiser. Needs and costs of items must be described in detail rather than simply listing general terms such as "equipment" or "travel" or "team funds."

travel posters  
 lamp  
 banquet  
 costumes

Describe the fundraising activity(ies), including how the money will be collected and accounted for, and identify whether activity is a team/group/organization or individual student fundraising activity.

sale sky hawk cards, turn into finance office

Describe any transportation or supervision needed to complete the fundraiser, and explain how potential risks or safety concerns will be addressed.

no safety risks

I hereby represent that I am the head coach/advisor of the team or organization named above and that the information provided herein is correct and complete to the best of my knowledge. I have read and understand the fundraising guidelines set forth in Nebo School District Policy #KAC, School Fundraising Activities.

Signature of Coach/Advisor: [Signature] Date: 8/17/20

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