



Haslett Public Schools

REQUEST FOR PERMISSION TO CONDUCT A FUND-RAISER

Person Responsible:

Telephone:

Email Address:

Home Address:

Club or Organization:

Fund-raising Activity (candy sale, carnival, car wash, etc.):

Dates of Sale:

Type of Sale (door-to-door, ticket sale, etc.):

Target Audience:

Purpose for which money is to be used:

If sale of merchandise, name of company or salesperson who is providing the items:

Plans for publicizing the purpose of the fund-raising activity:

Signature: _____

Date: _____

A. TO BE COMPLETED BY PRINCIPAL/SUPERVISOR/ATHLETIC DIRECTOR/BOOSTER BOARD

Fund-raising project is not approved. Reason:

Fund-raising project is approved.

Date: _____

Signature of Principal/Supervisor/Athletic Director/Booster Board

B. TO BE COMPLETED BY ASSISTANT SUPERINTENDENT

Not Approved Reason:

Approved

Date: _____

Signature of Assistant Superintendent

***Fund-Raiser cannot be held until approval has been received from "A" and "B" above.**



Haslett Public Schools

FUND-RAISING ACTIVITY REPORT

CLUB OR ORGANIZATION:

ACTIVITY:

DATE:

Gross Income or Receipts: \$

TOTAL INCOME:\$

Less Expenses:

1. Cost of Goods Sold: \$

2. Others (list):

3.

4.

5.

TOTAL EXPENSES:\$

NET PROFIT OR LOSS:\$

Fund-Raising Sponsor

Building Administrator

****This form is due to the Superintendent's Office 30 days
after the final day of the sale.****