

**FREEDOM AREA SCHOOL DISTRICT  
Fundraising Request Form**

**Must be completed and submitted for approval to the Director of Food Service one month prior to event.**

A copy of the form must remain in the District's Administrative Offices once submitted and signed by the Director of Food Service and Building Principal

Club/Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date(s) of Fundraiser: Start \_\_\_\_\_ End \_\_\_\_\_

Purpose of Fundraiser: \_\_\_\_\_

Type of Fundraiser:     Sale what will you be selling? \_\_\_\_\_

Raffle what will you be raffling? \_\_\_\_\_

Other \_\_\_\_\_

**Please provide details (items being sold and nutrition labels):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please read carefully and sign below:

***This form must be complete in its entirety and submitted no less than one month prior to fundraising activity.***

I understand all policies and procedures and agree to abide by all regulations.

Student Organization President's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Organization Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Approval: \_\_\_\_\_ Date of Denial: \_\_\_\_\_

Building Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Food Service Signature: \_\_\_\_\_