

Club/Organization Fundraising Form

This form must be completed and returned to the Director of Student Activities at least two weeks prior to the fundraising event.

Club/Organization: *

Organizer Name: *

First

Last

Organizer Phone Number: *

Organizer E-mail: *

Advisor Name: *

First

Last

Advisor Phone Number:

Advisor Email: *

Fundraiser Description: *

(include description and purpose of fundraising/donation effort)

Event Date: *

Start Time: *

 : AM

HH

MM

End Time: *

 : AM

HH

MM

Fundraiser Location:

(if applicable)

Name: *

First

Last

The electronic signature consists simply of your name, typed by you on your keyboard. The signature is your confirmation that the application you have filled out is your own work and the information is factually true. Once you type in your name and the date, this will count as your electronic signature.

Date: *



SUBMIT