



# FUNDRAISING APPROVAL FORM

PERRIS UNION HIGH SCHOOL DISTRICT

SCHOOL SITE: \_\_\_\_\_

PROPOSED EVENT: \_\_\_\_\_

REQUESTING CLUB/ORGANIZATION: \_\_\_\_\_

CLUB ADVISOR: \_\_\_\_\_ PHONE EXT: \_\_\_\_\_

CLUB/EVENT CONTACT PERSON: \_\_\_\_\_

DESCRIPTION of the EVENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE(s) & TIME(s) OF THE EVENT: \_\_\_\_\_

PRE-SALE DATES: \_\_\_\_\_  N/A

LOCATION OF THE EVENT: \_\_\_\_\_

CHAPERONES: \_\_\_\_\_

\_\_\_\_\_

Is food being served? \*\*  Yes  No (If yes, allow additional time for event approval)

Is a Purchase Order needed?  Yes  No (Please attach necessary quotes)

Names of any companies where product will be purchased (may not apply to all events) \_\_\_\_\_

\_\_\_\_\_

Will a Contract with an outside agency be used?  Yes (attach contract for approval by Purchasing)  No

Is Insurance Required?  Yes (attach ins. for approval by Purchasing)  No

Are district facilities or equipment being used?  Yes (attach COPY of the use of facilities form)  No

Is event off campus?  Yes (attach copy of approved field trip request)  No

Is transportation required  Yes (attach approved transport. request form)  No

Has the Assistant Principal been contacted regarding security? If so...  Yes (how many? \_\_\_\_\_) (date requested \_\_\_\_\_)  N/A

Custodians required?  Yes (submit PO to cover cost for Security and/or Custodian)  No

Is this event on the school events calendar?  Yes  No Date added: \_\_\_\_\_

Has the fundraiser type been board approved?  Yes  No (cannot be approved without board approval)

Fundraising Event Profit Form attached (required for approval)

## APPROVAL SIGNATURES:

Club Officer \_\_\_\_\_

Date Signed \_\_\_\_\_

Club Advisor \_\_\_\_\_

Date Signed \_\_\_\_\_

ASB Advisor \_\_\_\_\_

Date Signed \_\_\_\_\_

Principal/Designee \_\_\_\_\_

Date Signed \_\_\_\_\_

Nutrition Services\*\* \_\_\_\_\_

Date Signed \_\_\_\_\_

Business Office \_\_\_\_\_

Date Signed \_\_\_\_\_