EAST PRAIRIE R-2 SCHOOL DISTRICT
FUNDRAISING EVENT APPLICATION FORM

In an effort to coordinate the fundraising activities of all groups associated with the schools, we ask each group planning a fundraising activity to complete the following application:

SPONSOR INFORMATION

Name of Sponsoring Organization: _____

Contact Person: _____

Address: _____

Telephone: (_____) _____ - _____

EVENT INFORMATION

Location: _____

Date(s) and Time(s): _____

Ending Date of Event: _____

Please Describe the Event: _____

_____

Are students involved in this activity?   Yes   No   If yes, who? _____

_____

In your knowledge, is another grade level, community organization, or group in the community currently involved with this fundraising event?   Yes   No   If yes, who? _____

_____

USE OF FUNDS

Please indicate where the funds will be utilized: _____

_____

Financial Information (Please Estimate)

Total Proceeds: $ _____
Expenses: $ _____
Net Proceeds: $ _____

Submitted By: _____

Building Principal: _____

Superintendent: _____