

QUEEN ANNE'S COUNTY HIGH SCHOOL ATHLETIC BOOSTERS
FUND RAISING APPROVAL FORM

This form is to be used to apply for fund raisers to be held in the stadium, or on school property on a date with a "paid" event in the stadium.

Team _____ JV _____ Varsity _____

Coach _____ Phone _____

Lead Parent _____ Phone _____

Date(s) of Fund Raiser _____

Location of Fund Raiser _____

Description of Fund Raiser _____

If the Fund Raiser is a donation, please complete the following:

Donor _____ Amount _____

Does the donor wish to remain anonymous? _____

Projected amount of money to be raised _____

Purpose of the Fund Raiser - you must be specific.

Please provide an order form or any information necessary to clarify your order.

Approval: (signature and date):

Coach _____ Date _____

SGA _____ Date _____

Athletic Booster President _____ Date _____

Athletic Booster Treasurer _____ Date _____

Athletic Director _____ Date _____

Assistant Principal _____ Date _____

Copy to: Administration, Athletic Director, Coach, Athletic Boosters

RETURN ALL COMPLETED & SIGNED FORMS TO BETTY LEE