



ACTIVITY REQUEST FORM

Part A: To Be Completed By Requesting Person or Organization

Requesting Organization: _____

Name of Person in Charge: _____

Description of Activity: _____

Duration of Activity: _____

Item(s) to be Sold: _____

Unit Cost of Item(s) Sold: _____

Any additional services requested? (Custodial, Security, Food Service, Etc.): _____

Fundraiser proceeds will be spent in the following manner: _____

Part B: To Be Completed By Site Administrator

Approved: ☐ Yes ☐ No

By: _____

Date: _____

Signature

Comments: _____

