

Chatham Central School District
FUNDRAISING REQUEST FORM - for School Sponsored Clubs

*This Fundraising form should be completed anytime a school sponsored club (such as an athletic team, student class, robotics club, etc) plans on having a fundraiser. This will allow the district to track all fundraising initiatives and make sure we have the needed insurance in place. You should use a separate fundraiser form for each fundraiser you plan on doing in your organization. If your group projects raising a **net amount more than \$3000 for the year, or \$2,000 in a single fundraising event, the fundraiser must be Board approved prior to holding the fundraiser/activity.** Please refer to district policy 5251 "Fund Drives, Gifts, Donations and Solicitations" for rules and guidelines before submitting this form for approval.*

Organization/Group _____ Date Form Completed _____

Name of Organizer _____ Email address _____

Dates the Fundraiser Will Take Place _____

Please briefly describe the activity, including any details that might be helpful to the approval process. Please include the purpose of the fundraiser. Attach additional page(s) if necessary.

What Percentage of the collected money, if any, goes to a 3rd party platform or vendor?

(The District will be reluctant to approve a fundraiser with large percentages going to 3rd parties and not directly to the students)

_____ %

Remember to communicate the fundraiser to student families before discussing it with student(s). All families have the right to opt out of fundraising. Explain how you are going to communicate this fundraiser to families.

Students can not be expected to utilize personal devices and/or assets (download apps on cell phones, use a student/family's personal car, or use other personal equipment) without written consent.

During this fundraiser, are you expecting students to use a personal asset? YES NO

If the answer is yes, please attach a copy of a self created parent consent form that must be sent home to families ahead of time.

Total Anticipated Revenue

Fundraising Activity:

Projected Revenue From Fundraiser

\$ _____

Total Anticipated Expenses

Anticipated Expenses That you are hoping to
Fundraise for:

Projected Cost

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

Net Fundraising Target (Revenue – Expense)

\$ _____

If you are a school club, what is the projected Activity Budget for the Year?

\$ _____

What is the current Account Balance?

\$ _____

Are there other approved fundraising activities occurring around the same time as this activity? YES NO

If yes, does your fundraising activity provide a conflict with the other activities? Please explain:

Other Comments: _____

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Signatures

Organizer / Advisor

Date

Principal

Date

Student Org. President

Date

Printed Name: _____

Student Org Treasurer

Date

Printed Name: _____

Superintendent

Date