

EL DORADO UNION HIGH SCHOOL DISTRICT

SCHOOL SUPPORT ORGANIZATION

Fund-Raising Request and Authorization

School: \_\_\_\_\_
Applicant Organization: \_\_\_\_\_
Starting Date: \_\_\_\_\_
Address: \_\_\_\_\_
Requested By: \_\_\_\_\_
Advisor Name: \_\_\_\_\_
Address: \_\_\_\_\_

Date: \_\_\_\_\_
Phone: \_\_\_\_\_
Finishing Date: \_\_\_\_\_
Delivery Date: \_\_\_\_\_
Phone: \_\_\_\_\_
Office Held: \_\_\_\_\_

Purpose of fund-raiser (attach additional sheet if necessary): \_\_\_\_\_

Is fund-raiser in school? [ ] Yes [ ] No Is fund-raiser in community? [ ] Yes [ ] No

Description of fund-raiser (attach additional sheet if necessary): \_\_\_\_\_

What is being sold? \_\_\_\_\_

Is money collected? [ ] Yes [ ] No Are orders being taken? [ ] Yes [ ] No

Will money go into the ASB account? [ ] Yes [ ] No

Which account will it go into? \_\_\_\_\_

Estimated income: \$ \_\_\_\_\_ Estimated expenditure: \$ \_\_\_\_\_

Authorization Holder agrees to indemnify and save harmless the El Dorado Union High School District, its officers, agents, and employees, and against any and all claims, demands, and causes of action that may be made or brought against the School District, its officers, agents, and employees, caused by, arising out of, or in any way connected with the use by Authorization Holder of the El Dorado Union High School District facility or the exercise of the privilege herein granted.

SIGNED (agent of organization): X \_\_\_\_\_ Date: \_\_\_\_\_

TO BE COMPLETED BY SCHOOL PERSONNEL

Special Instructions: \_\_\_\_\_

Principal: \_\_\_\_\_ Date: \_\_\_\_\_ [ ] APPROVED [ ] DENIED