



# NORTH HAVEN HIGH SCHOOL FUND RAISING PROPOSAL

**PROPOSALS FOR FUND RAISING MUST BE SUBMITTED IN WRITING TO THE PRINCIPAL ONE MONTH BEFORE THE PROPOSED START OF THE ACTIVITY.**

Date Submitted: \_\_\_\_\_

Organizer's Name: \_\_\_\_\_

Organization to benefit from fundraiser: \_\_\_\_\_

Reason for fund raising:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Method of fund raising (including information about the supplier if appropriate):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Target amount to be raised (anticipated profit from the activity): \_\_\_\_\_

**\*If anticipated profit exceeds \$500, this form must be forwarded to central office for approval.**

Fund Raising Start Date: \_\_\_\_\_ Fund Raising End Date: \_\_\_\_\_

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Organizer's Signature: \_\_\_\_\_

Principal/Central Office Approval to Proceed: \_\_\_\_\_

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**WITHIN ONE WEEK OF FUNDRAISING COMPLETION, SUMMARY OF FUND RAISING ACTIVITY MUST BE SUBMITTED IN WRITING TO THE PRINCIPAL, MONEY MUST BE DEPOSITED WITH MAIN OFFICE SECRETARY, AND FORM MUST BE SIGNED BELOW AND RETURNED TO PRINCIPAL'S SECRETARY.**

Total Amount Raised: \_\_\_\_\_ Organizer's Signature: \_\_\_\_\_

Proceeds equaling amount raised have been deposited with main office secretary:

Main Office Secretary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*If gross/net receipts exceed \$500, form must be forwarded to central office.**