

**Warren County Technical School  
Fundraising Request Form**

Group Name \_\_\_\_\_

Advisor Name \_\_\_\_\_

Name of Fundraising Company \_\_\_\_\_

Anticipated Start Date \_\_\_\_\_ Anticipated End Date \_\_\_\_\_

Amount of money to be invested in the fundraiser \$ \_\_\_\_\_

Amount of profit expected \$ \_\_\_\_\_

What will the money be used for? \_\_\_\_\_

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

**Fundraising Forms should be given to MJ Schubert.**

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**Approval**

\_\_\_ Approved

\_\_\_ Denied

*Date of Approval* \_\_\_\_\_

*Please note:*

*Like fundraisers will not be approved to run simultaneously. If your fundraiser includes use of the building, a facilities user form must accompany this form.*