Lincoln High School

2020-2021 FUNDRAISING REQUEST FORM

The ASB Council is required to approve any fundraising activity. You must have this form approved prior to your fundraiser. Once approved, you are required to deposit any funds raised to the Finance Office daily.

Student Making Request: __________________________________________________________

Club Name: ________________________________________________________________

Certificated Faculty Club Advisor: ____________________________________________

Today’s Date: __________________________________________________________________________

Description of Fundraiser: _______________________________________________________

_______________________________________________________________________________

Purpose of Income: ______________________________________________________________

_______________________________________________________________________________

Proposed Date(s) of Sale: _________________________________________________________

Facility Needed (if any): _________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

Student Signature _____________________________________________________________

Certificated Faculty Advisor Signature __________________________________________

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(For ASB Use Only)

Date Received: ________________  □ Fundraiser Approved □ Fundraiser Not Approved

Reason: _________________________________________________________________________

Fundraising Activity: _____________________________________________________________

Approved Sale Date(s): _________________________________________________________

_______________________________________________________________________________

ASB Commissioner of Clubs/Fundraising ____________________________________________

ASB Advisor _________________________________________________________________

Principal or Admin Designee ____________________________________________________

Revised 3/24/2016