2016-2017 CLASS OR CLUB ACTIVITY/FUNDRAISER APPLICATION

| Application | Date: | |
|--------------------|-------|--|
| | | |

YOU MUST COMPLETE THE ENTIRE FORM AND OBTAIN APPROVAL AT LEAST 2 WEEKS BEFORE THE EVENT. ONCE APPROVAL IS GRANTED, THE EVENT MUST BE SCHEDULED IN SCHOOL DUDE IF APPLICABLE.

| 1. | Name of Event: T | ype of Event: | Activity | Fundraiser | | | |
|-----|---|-------------------|------------------|------------|--|--|--|
| 2. | Date of Event: Starting Time: | | Ending Tir | me: | | | |
| 3. | Group Sponsoring Event: | | | | | | |
| 4. | Faculty Member in Charge: | | | | | | |
| 5. | Number of Chaperones: Faculty Parent(s) (A list of chaperones must be turned into the office prior to the office prio | | ble) | | | | |
| 6. | Briefly Describe Event: | | | | | | |
| | Location of Activity: Will you advertise? Yes No If yes, how? | | | | | | |
| | | | | | | | |
| 9. | Will an administrator need to be present? Yes No | | | | | | |
| 10. | Faculty member in charge is responsible for the banking deposit envelope with the club name designated on the outside. Please instructions. | | • | | | | |
| 11. | . Have transportation arrangements been made, if needed? Yes_ | N/A | | | | | |
| 12. | 2. If the event is a bake sale, the Director of the School Cafeteria n | needs to sign off | : | | | | |
| | Signature of Director | | | | | | |
| 13. | 3. If applicable, contact the Dover Police Department to hire office | ers for the event | . Yes 1 | N/A | | | |
| 14. | l. Advisor's Signature: | (Please n | nake it legible, | thanks) | | | |
| | *******SUBMIT THIS FORM TO THE PRINCIPAL'S | S SECRETARY | Y.******** | * | | | |
| | Approved: Denied: | | | | | | |
| | Reason for Denial: | | | | | | |
| | Principal's Signature: | | | | | | |

Revised: 9/2016