

GRAYS HARBOR COLLEGE
FUNDRAISING REQUEST FORM
SPORTS TEAMS AND CLUBS

FOR OFFICIAL USE ONLY:

FEE CODE: _____

CHANGE FUND: _____ AMOUNT: _____

- **PER STATE REGULATIONS, ALL FUNDRAISED MONEY MUST BE DEPOSITED WITH THE CASHIER'S WINDOW WITHIN 24 HOURS OF THE EVENT.**
- This form **MUST** be completed with all necessary signatures and submitted to the Athletic Director or Coordinator of Student Activities **AT LEAST TWO WEEKS** prior to the start of your fundraising campaign or event.
- **Original** with all signatures and completed information to Business Office; **photocopy** for Athletic Dept. or the Director of Student Life.

TEAM/CLUB Information

Team/Club: _____

Coach/Advisor: _____ Phone number: _____

Email address: _____ Account Number: _____

EVENT/FUNDRAISER Information

Event Title: _____ Location: _____

Start Date & Time: _____ End Date & Time: _____

FINANCIAL Information

Estimated Income: _____ - Estimated Expenses: _____ = Estimated Profit: _____

Will you need petty cash and a cash box to start your event? _____ How much? _____

What does your team/club plan to do with any profits generated by this event?

How will this fundraising activity be tracked/recorded? _____

Coach/Advisor Signature: _____ Date: _____

A.D. or Director of Student Life: _____ Date: _____

Business Office Approval _____ Date: _____

After the event information

Final Income: _____ **- Final Expenses:** _____ **= Profit:** _____