

Hawthorne High School  
Fundraiser-Activity-Event  
Approval Form

TO: Faculty

FROM: Office of Student Activities

If you plan to have any type of fundraiser, activity or event, this form must be completed at least 2 weeks **BEFORE** you commit yourself or your group. All other rules regarding fundraising still apply. Please complete all sections of this form as applicable. **All forms must be signed by Ms. Russo first. Please make sure to notify the Principal's office immediately if there are any changes to an approved form.**

Date this form is being submitted: \_\_\_\_\_

Staff member's name: \_\_\_\_\_

Organization: \_\_\_\_\_

Type of Fundraiser/Activity/Event: \_\_\_\_\_

How will funds be raised? ( sale, dinner, etc. ) \_\_\_\_\_

Reason for Fundraiser/Activity/Event: \_\_\_\_\_

Date(s) of Fundraiser/Activity/Event: \_\_\_\_\_ Alternate Date(s) \_\_\_\_\_

Set up time required: From \_\_\_\_\_ To: \_\_\_\_\_

ACTUAL time of activity/event (if applicable) From: \_\_\_\_\_ To: \_\_\_\_\_

Building/Field Use Required: \_\_\_\_\_

Specific needs: (tables, chairs, risers, etc.- If approved, please provide a simple diagram and/or detailed description below.

Is Technology needed? Yes:      No:

Tech services required: \_\_\_\_\_ Ticket number: \_\_\_\_\_

Food services needed: Yes:      No:      Details \_\_\_\_\_

Additional comments: \_\_\_\_\_

Signature: \_\_\_\_\_

Administrative approval

Coordinator of Student Activities: \_\_\_\_\_ Date: \_\_\_\_\_

Athletic Director: \_\_\_\_\_ Date: \_\_\_\_\_

Principal: \_\_\_\_\_ Date: \_\_\_\_\_