

**F. D. ROOSEVELT HIGH SCHOOL**  
**ATHLETIC DEPARTMENT**



**Hyde Park Athletics**  
**Request for Fundraising Activity**

*Completed form should be submitted to the Athletic Director no later than **4 weeks** prior to the beginning of the fundraising activity. The activity may not begin without administrative approval.*

Date submitted: \_\_\_\_\_

Team/organization: \_\_\_\_\_ Grade Levels: \_\_\_\_\_

Person directly responsible for fundraising activity:

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Type of fundraising activity:

\_\_\_\_\_

Start Date of Fundraiser: \_\_\_\_\_ End Date of Fundraiser: \_\_\_\_\_

Fundraiser Company: \_\_\_\_\_

Company Contact Person: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Location of activity:

\_\_\_\_\_

Purpose of activity: [what will funds be used for?]

\_\_\_\_\_

**Funds**

Approximate funds needed for startup \$ \_\_\_\_\_

Student role in fundraising:

\_\_\_\_\_

Total expected profit \$ \_\_\_\_\_

**All funds are to be deposited directly into the Co-curricular accounts!**

**\*At conclusion of fundraiser, submit follow-up sheet indicating profit and success**

\_\_\_\_\_  
Coach's signature

\_\_\_\_\_  
Team Captain's signature

\_\_\_\_\_  
Athletic Director's signature

\_\_\_\_\_  
Principal's signature