

EL DORADO UNION HIGH SCHOOL DISTRICT

SCHOOL SUPPORT ORGANIZATION

Fund-Raising Request and Authorization

School: \_\_\_\_\_

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

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

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

Starting Date: \_\_\_\_\_

Finishing Date: \_\_\_\_\_

Address: \_\_\_\_\_

Delivery Date: \_\_\_\_\_

Requested By: \_\_\_\_\_

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

Faculty Advisor/  
School Coach Name: \_\_\_\_\_

Office Held: \_\_\_\_\_

Address: \_\_\_\_\_

Purpose of fund-raiser (attach additional sheet if necessary):

Is fund-raiser in school?  No  Yes

Is fund-raiser in community?  No  Yes

Description of fund-raiser (attach additional sheet if necessary):

Is a product being sold?  No  Yes If so, what is being sold?

Which account or organization will funds be deposited into?

Estimated income: \$ \_\_\_\_\_

Estimated expenditure: \$ \_\_\_\_\_

Authorization Holder agrees to indemnify and save harmless the El Dorado Union High School District, its officers, agents, and employees, and against any and all claims, demands, and causes of action that may be made or brought against the School District, its officers, agents, and employees, caused by, arising out of, or in any way connected with the use by Authorization Holder of the El Dorado Union High School District facility or the exercise of the privilege herein granted.

Role of the Faculty Advisor/School Coach:

When a school supported organization holds a fundraiser it is the responsibility of the Faculty Advisor/School Coach to manage the fundraiser and ensure that all district and school policies and procedures are followed. Please ensure that the points below are maintained:

- The Faculty Advisor/Coach should be present during all fundraisers.
- The Faculty Advisor/Coach is responsible for any cash boxes that are checked out.
- The Faculty Advisor/Coach is responsible for assuring that all funds and inventory are accounted for.

SIGNED (Faculty Advisor/School Coach): **X** \_\_\_\_\_

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

SIGNED (Athletic Director if sport team): **X** \_\_\_\_\_

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

TO BE COMPLETED BY SCHOOL PERSONNEL

Special Instructions: \_\_\_\_\_

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

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

APPROVED  DENIED