



Silverado High School
Fundraising Request
 Associated Student Body



Date: _____

Club: _____

Dates of Activity: _____

Number of Students Involved: _____ Number of supervisors: _____

Nature Of Activity: (i.e. Car Wash, Catalog Sale, etc.) _____

Cash Box needed? Yes / No _____ Date needed: _____

Sell on Webstore? Yes / No _____

Student Fundraiser Permission Forms Completed: Yes / No _____

Item(s) for sale: _____ Sale Price(s): _____

Estimated Expenses: _____ Estimated Income: _____

Anticipated Profit: _____ (Income- Expense= Profit) _____

Requested by: _____

Contact Information: _____

Club President: _____ Date: _____

Club Advisor: _____ Date: _____

ASB Meeting: _____

APPROVED: _____ DENIED: _____

ASB President: _____ Date: _____

ASB Advisor: _____ Date: _____

Principal/ Admin: _____ Date: _____

Fundraiser Code(s) _____

***Requests submitted after end-of-day Tuesday
 may be subject for approval the following week.***