



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Darlene Langley Date: 7/5/23  
 Club Name: Cheerleading  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Rita's Sitalian Ice Sale  
 Purpose of Fund Raiser: Raise funds for stunt clinic, senior night, cheer gear, end of the year celebration, cheer camp

Start Date of Project: August 2023 Completion Date of Project: June 2024  
 Date of Sale(s).....From: 8/11/23 To: June 18, 2024

Sale Area/Location: Union High  
 Sale will be monitored by: Darlene Langley

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
 Vendor Business Name: \_\_\_\_\_  
 Vendor Address: \_\_\_\_\_  
 City: State & Zip code: \_\_\_\_\_  
 Unit Cost of Product/Service: \$ \_\_\_\_\_  
 Proposal Sale Price: \$ \_\_\_\_\_  
 Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
 Minimum Total Profit Expected: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>7/5/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>7/17/23</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>8/2/23</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____