



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ASHLEY FOSTER, STEVE RADZIK Date: 1/15/26

Club Name: VHS Flag football

Acct. No.: 3260 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Vertical Raise Online Fundraiser

Purpose of Fund Raiser: End of the year party + trophies

Start Date of Project: 3/9/26 Completion Date of Project: 6/30/26

Date of Sale(s): From 3/9/26 To: 6/30/26

Sale Area/Location: \_\_\_\_\_

Sale will be monitored by: \_\_\_\_\_

\*\*\*\*\* 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: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 1/15/26

## Vice Principal Signature

Signature: [Signature] Date: 1/15/26

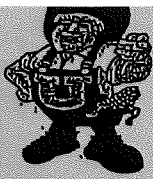
## School Treasure Signature

Signature: [Signature] Date: 1/15/26

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: ☐ YES ☐ NO By: \_\_\_\_\_





# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): A. Foster & S. Radzik Date: 1/15/26

Club Name: VHS Flag football

Acct. No.: 3760 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: T-shirt sale

Purpose of Fund Raiser: Raise money for end of year awards & activities

Start Date of Project: 2/1/26 Completion Date of Project: 6/30/26

Date of Sale(s): From 2/1/26 To: 6/30/26

Sale Area/Location: \_\_\_\_\_

Sale will be monitored by: \_\_\_\_\_

\*\*\*\*\* 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: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 1/18/26

## Vice Principal Signature

Signature: [Signature] Date: 1/19/26

## School Treasure Signature

Signature: [Signature] Date: 1/19/26

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_