



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Ashley Foster, Steve Radzik Date: 9/25/24

Club Name: UHS Flag Football

Acct. No.: 3260

Acct. Balance to Date: _____

Type of Fund Raiser: ~~Brochure~~ T-shirt sale

Purpose of Fund Raiser: End of the year activities & awards

Start Date of Project: Oct '24

Completion Date of Project: June '25

Date of Sale(s): From _____

To: _____

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: 9/25/24

Vice Principal Signature

Signature: [Signature]

Date: 9/25/24

School Treasure Signature

Signature: [Signature]

Date: 9/26/24

Placed on BOE Meeting Agenda for:

Month: _____

Year: _____

Approved:

YES

NO

By: _____



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Ashley Foster, Stephen Radzik Date: 9/25/24

Club Name: UHS FLAG Football

Acct. No.: 3260 Acct. Balance to Date: _____

Type of Fund Raiser: Online Fundraiser

Purpose of Fund Raiser: To raise money for end of year Activities

Start Date of Project: Oct '24 Completion Date of Project: June '25

Date of Sale(s): From _____ To: _____

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: Blast Athletics

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: 9/25/24

Vice Principal Signature

Signature: [Signature] Date: 9/24/24

School Treasure Signature

Signature: [Signature] Date: 9/26/24

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____