



SCHUYLKILL VALLEY SCHOOL DISTRICT

929 LAKESHORE DRIVE
LEESPORT, PA 19533-8631

FUNDRAISING APPROVAL FORM

(includes student/staff fundraising or crowdfunding activities)

Please complete and return this form to the Principal/Athletic Director a minimum of two weeks in advance of the fundraiser initiation. The Principal or Athletic Director must approve the fundraiser before any arrangements are made to begin. Fundraiser approval will be based upon, but not limited to, compliance with all School District policies and guidelines, state and federal laws, calendar conflicts, and demonstrated need. Schuylkill Valley School District is not bound or obligated by any financial agreements made between the fundraising organization and a third party. Any arrangements or costs incurred prior to approval of this form may be denied reimbursement by the District.

APPLICANT INFORMATION

Organization Name _____ Date: _____

Advisor/President Name _____ PH: _____

Advisor/President Email _____

All other individuals who will be initiating, administering, and overseeing the fundraising/crowdfunding activity: _____

FUNDRAISER INFORMATION

Fundraiser Name _____

Start Date: _____ End Date: _____

Time/s: _____ Location: _____

Please provide a brief description of the fundraiser including any and all sources of revenue (attach extra sheets if necessary):

(If using a crowdfunding campaign, e.g. GoFundMe, please provide the website or social media venues, that will be used)

Projected Profit: _____

Purpose of the Fundraiser (how will profit be used): _____

APPROVAL (Principal/Athletic Director)

Signature

Printed Name

Date

FOR OFFICE USE ONLY	
Ref #	_____
Deposit Date	_____
Deposit Amount	_____