

## **Fundraiser Request Form**

Date:			501.798/1 <b>1</b>			
Dates of re	equeste	ed Fundraise	er:			
Name of O	_					
Name of Fa	aculty 9	Sponsor:			<del></del>	
	ription produc	of fundraisi ts, etc	ng activity, items to be	sold, nam		
		niserWha	t is the money to be use	d for?		
			:			
Signature o	f Facul	ty sponsor:				
Cash Box R	equired	1?	YES NO			
Please reme	ember 1	that an adul	n to Mr. Tom Perkins 1 v It must accompany all h school board policy. See	all sales a	nd all monies must be	
Administrat	or – To	m Perkins _				
Date			Approved	or	Denied	
Approved	or	Denied				
North High School			1437 Rochester		Wichita, Kansas 67203	