



ASSOCIATED STUDENT BODY (ASB) APPROVAL APPLICATION FOR NON-EXEMPT FUNDRAISING ACTIVITY

FUNDRAISING INFORMATION

Club/Account	#	Date
Club Advisor	School Site	
Name of Fundraiser	Date(s) of Fundraiser / / to / /	Time of Day <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

☐ Use of Facilities Request submitted ☐ On Campus Sales ☐ Off Campus Sales

Location (Deemed safe and appropriate for students. ____ Principal's Initials)

Intended Use For Funds Raised

Items to be sold	Income Potential	Items Ordered #	Resale Price x\$	Income Potential = \$
	Estimated New Profit	Income Potential \$	Cost of Goods Sold Less \$	Net Profit = \$

PLEASE INDICATE THE METHOD(S) TO BE USED FOR OFF CAMPUS SALES:

- ☐ Sponsorship/Pledges ☐ Internet/Telephone ☐ Sale of Merchandise ☐ Box Office Sales
☐ Tournaments/Meets ☐ Family & Friends ☐ Ticket Sales
☐ Restaurant Family Night ☐ Membership ☐ Coin Containers
☐ Other _____

Exempt Activities (Board Approval is not required for the following):

- ASB Cards, Yearbooks, Student Store items
- Ticket Sales - Athletic/other school-sponsored activities
- Sales of student portraits class rings, grade gowns
- Soliciting advertisements for school publications

APPROVALS

Club Officer's Signature (JH/HS)	Date	Club Advisor's Signature (EL/JH/HS)	Date
High School Activities Director's or Junior High School Coordinator's Signature			Date
Principal's Signature (Site administrator acknowledges the location is suitable and appropriate for student use and fundraising activity.)			Date

CVUSD BOARD OF EDUCATION APPROVALS

Board Approved Date	Director of Fiscal Services Signature	Date
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