

Dover-Sherborn Athletic Department

Fundraiser Request/Approval Form

(This form must be submitted to Mr. Parcels, Athletic Director, 14 days prior to the event)

Date of Request: _____

Name of Athletic Team Requesting Fundraiser Approval: _____

Fundraiser Start Date: _____ Fundraiser End Date: _____

Person who has responsibility for fundraising event: _____

What is the Fundraiser Event and why are you raising funds: _____

Location of fundraising event: _____

This fundraiser will include (please check all that apply):

- Sales of items by students within the school
- Sales of items by students outside of school
- Events targeting students or parents participation
- Events targeting parent participation only
- Soliciting students
- Soliciting companies and organizations

If this fundraising event is being conducted by a private sport-specific booster group, what is the full name of such group and who is in charge of the group:

Any event that will involve alcohol consumption or any type of gambling, cannot involve any student that is enrolled within Dover-Sherborn Regional Schools. "Canning", SnapRaise and GoFundMe type fundraisers are not allowed.

Signature: _____ Date: _____

Decision: _____ Date: _____ Signature: _____