

WICKENBURG UNIFIED SCHOOL DISTRICT NO. 9  
FUNDRAISING APPLICATION

- Hassayampa Elementary       Vulture Peak Middle School  
 Festival Foothills Elementary       Wickenburg High School  
 District Office       Other: \_\_\_\_\_

Which account is this fundraiser for:  Student Activity  Auxiliary  Athletic  Other: \_\_\_\_\_

All fundraising activities conducted in conjunction with school bookstore, athletic activities, student groups, clubs, school plays or other school activities, entertainment, or organizations must be approved by the site's student government and governing board of the school district (Sources: ARS §15-1121, §15-1125 and WUSD Policy JJE) (Source: ARS §15-1121)

PLEASE ATTACH ANY AND ALL SUPPLEMENTARY INFORMATION THAT WILL ASSIST THE ADMINISTRATION IN UNDERSTANDING THE SCOPE OF YOUR FUNDRAISER.

Name of Student Group: \_\_\_\_\_ Sponsoring Teacher: \_\_\_\_\_

Educational purpose to be supported by this effort: \_\_\_\_\_

Description of project/items to be sold/fundraising plan: \_\_\_\_\_

Date of fundraiser: \_\_\_\_\_

Anticipated expense of fundraiser: \_\_\_\_\_ Expected Revenue: \_\_\_\_\_

Change Fund needed:  Yes  No If yes, amount requested: \_\_\_\_\_

**Account Code per Depository Ticket:** \_\_\_\_\_

Method of tracking funds collected (such as roster, ticket sales, inventory, etc): \_\_\_\_\_

Other important information: \_\_\_\_\_

Sponsor's printed name: \_\_\_\_\_ Signature: \_\_\_\_\_

Student Council Approval:  Yes  No/Date: \_\_\_\_\_ **Attach a copy of StuCo minutes approving fundraiser**

Principal/Administrator Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Budget Approval if anticipated Expenses for fundraiser: \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Placed on Master Calendar by: \_\_\_\_\_ Date: \_\_\_\_\_