

**South Lyon Community Schools  
Athletic Department**

**REQUEST FOR PERMISSION TO CONDUCT A FUNDRAISING ACTIVITY**

School & Team: \_\_\_\_\_

Person Responsible: \_\_\_\_\_ Coach Responsible: \_\_\_\_\_

Date Activity Begins: \_\_\_\_\_ Date Activity Ends: \_\_\_\_\_

Items to be sold and/or description of activity: \_\_\_\_\_

Projected profit: \_\_\_\_\_

**Specific** purpose of fundraiser: \_\_\_\_\_

**Pre-Sale Only**

Check here if fundraiser requires a pre-sale then submit for approval. Do not proceed with this form if checked.

Total cost of items to be purchased: \_\_\_\_\_ Sales Representative: \_\_\_\_\_

Company & Sales Representative: \_\_\_\_\_

Athletic Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The following guidelines are to be followed:

- Coaches/Boosters are to keep a log of all transactions.
- All deposits and withdrawal requests must indicate the account number and bank transaction reference number.
- All fundraising activities must be completed by the date indicated above.
- All money earned must be deposited in the account and drawn out of the account
- There are to be NO cash payments to anyone.

Coaches Signature/Approval: \_\_\_\_\_ Booster's Representative Signature \_\_\_\_\_

**This fundraising activity and accounting must be completed by using the District Sponsored Fundraising Activity Summary Report.**

Names of all supervisors/chairpersons of the event & responsibilities:

_____	_____
_____	_____
_____	_____
_____	_____

For Building Use Only:  Approved  Not Approved

Athletic Director Signature: \_\_\_\_\_ Date \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Date \_\_\_\_\_

**This form must be filled out and approved before any fund raising event!**

## South Lyon Community Schools Athletic Department

### DISTRICT SPONSORED FUNDRAISING ACTIVITY SUMMARY REPORT

School & Team: \_\_\_\_\_ Date of Activity: \_\_\_\_\_

Name of Event: \_\_\_\_\_ Person Responsible: \_\_\_\_\_

Total Gross Sales  
(total money taken in):                   \$ \_\_\_\_\_

Less Sales Tax:                               \$ \_\_\_\_\_

Net Sales:                                       \$ \_\_\_\_\_

Date: \_\_\_\_\_ CK#: \_\_\_\_\_

Deposit Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Deposit Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**TOTAL DEPOSITS**                               \$ \_\_\_\_\_

**DIFFERENCE**                                       \$ \_\_\_\_\_  
(explain variance below):

Difference Explanation: \_\_\_\_\_

EXPENSE DETAIL					
Date	Vendor	P.O. Reference or check #	Description	Cost	Total Expenses

Explain any vendor bonus program (cash back for volume sales, free products, etc.):

\_\_\_\_\_

\_\_\_\_\_  
*Prepared by*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Verified by*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Coaches Signature*

\_\_\_\_\_  
*Date*