

WPS Fundraising Application Form

Elementary School Middle School High School

Date of Application: _____

Name of group responsible for fundraiser: _____

Name of person responsible: _____

Phone: _____ Email: _____

Dates for fundraiser: _____

Estimated minimum cost: _____

Any delivery dates: _____

Describe how funds will be raised:

Purpose of the fundraiser:

Who will be targeted for this fundraiser? (parents, students, extended community, etc.)

What is your collection/accounting process regarding the funds raised?

****All Funds Must Be Accounted For Within Two Weeks Of Closing The Event.

Please return completed form to your building Principal.

Approved _____

Not Approved _____

Date _____