



FUNDRAISER REQUEST

Complete the form below and turn into the School Office (ATTN: Rebekah Schwandt) or submit via email to: rschwandt@ucacademy.org. Please allow up to two weeks for approval.

FUNDRAISER CONTACT PERSON(S)

Department/Program Requesting Fundraiser: _____

Name of Fundraiser Coordinator: _____

Email: _____ Phone: _____

Name of UCA Administrator/Staff Sponsor: _____

FUNDRAISER DETAILS

Description of Fundraiser: _____

Start Date/Time: _____ End Date/Time: _____

Location (if applicable): _____

Target Audience: _____

(e.g who are you soliciting support/participation from)

Anticipated Cost/Profit:

Gross Amount \$ _____

Expenses \$ _____

Profit \$ _____

How funds will be used: _____

FUNDRAISER AGREEMENT

As the Coordinator/Sponsor of this fundraiser, we understand that it is our responsibility to ensure that all aspects of this activity conforms to UCA standards. All funds will be handled in full compliance with the UCA Fund Handling Procedures. We understand that a signed approval (below) is required before this fundraiser can be implemented.

Coordinator Signature: _____ Date: _____

Administrator/Staff Sponsor: _____ Date: _____

OFFICE USE ONLY

Fundraiser is: APPROVED DENIED (Reason: _____)

Signature: _____ Date: _____