EL DORADO UNION HIGH SCHOOL DISTRICT

Fund-Raising Request and Authorization

This form is to be completed and approved before the fundraiser.

School: Ponderosa High School	Date:
Applicant Organization:	Phone:
Starting Date:	Finishing Date:
Address:	Delivery Date:
Requested By:	Phone:
Advisor Name:	Office Held:
Address:	
Purpose of fund-raiser (attach additional sheet if necessary):	
Is fund-raiser in school? No Yes Is fund-raise Description of fund-raiser (Give it a title for the calendar)	ser in community?
Description of fund-raiser (Offer a title for the calendar)	
Is a product being sold? No Yes If so, what is being sold?	
Which account or organization will funds be deposited into?	
Estimated income: \$ Estimated exp	penditure: \$
Authorization Holder agrees to indemnify and save harmless the El Dorado Union High School District, its officers, agents, and employees, against any and all claims, demands, and causes of action that may be made or brought against the School District, its officers, agents, and employees, caused by, arising out of, or in any way connected with the use by Authorization Holder of the El Dorado Union High School District facility or the exercise of the privilege herein granted.	
SIGNED (agent of organization): X	Date:
TO BE COMPLETED BY SCHOOL PE	PROMINE
Special Instructions:	RSUNNEL
Deter	APPROVED DENIED
Date:	