

**BLACKSBURG MIDDLE SCHOOL**

Request for Fundraiser Activity

Fundraising should only be conducted when there is a specific need for a resource and there are no other funding sources available.

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| Date: |  |
| Name of Person Requesting: |  |
| Department/Grade Level/Club: |  |
| Document what other funding sources you have exhausted or explored first: |  |
| Description of the Fundraiser: |  |
| Fundraising Company or Organization: |  |
| Timeframe: |  |
| What will the proceeds be used for: |  |
| Approved by: |  |
| Date: |  |