

**FUNDRAISING / SPONSORSHIP / EVENT
PROPOSAL FORM**

Name of contact: _____ Phone #: _____ home
Email: _____ cell
Group/Team: _____

FUNDRAISING / EVENT INFORMATION

Name of proposed event: _____
Event Date: _____ Event time: _____
Event Location: _____
Event Description: _____

- | | |
|--|--|
| <input type="checkbox"/> Raffle | <input type="checkbox"/> Entry Fee |
| <input type="checkbox"/> Auction | <input type="checkbox"/> Donations |
| <input type="checkbox"/> 50/50 Tickets | <input type="checkbox"/> Other (please provide detailed information) |

SPONSORSHIP INFORMATION

Name of sponsor: _____
Description of sponsorship received: _____

**Please submit this form to the executive for approval prior to approaching
business' asking for sponsorship donations.**