

Condon School District 25J

Code: **IGDF-AR**
Adopted: 4/10/01
Readopted: 11/9/05; 11/20/08

Fundraiser/School Sponsored Activities Request

Activity: _____

Date(s): _____

Purpose of Activity: _____

**** Funding:** _____
(Sales, tuition, participation fees, etc....Please describe)

Activity Sponsor: _____
(Director's Name/Organization)

Activity Coordinator: _____ **Date** _____
(Signature of person responsible for activity)

Authorization: _____ **Date** _____
(Signature of Superintendent or Principal)

Questions regarding this activity should be directed to the person coordinating the activity.

**** All funds collected or generated as a result of this activity must be submitted to the district business manager.**