

**InterMountain
Education Service District**

Code: **IGDF-AR**
Revised/Reviewed: 1/19/11

Student Fund-Raising Activity Request

DATE: _____ To _____

To Whom it May Concern:

The InterMountain Education Service District does hereby authorize:

Name of Individual Receiving Authorization

to sell _____
Name of Product/Item for Sale

for the purpose of raising funds for

Funds to be Used For

Signature of Person Authorizing Sales

Date

Signature of Fund Raiser Coordinator

Date

Any questions regarding this fund-raising activity should be directed to the person authorizing sales.