

**Richmond School District**  
**N56 W26530 Richmond Road**  
**Sussex, WI 53089**

**FUND RAISING APPLICATION FORM**

Name of Group: \_\_\_\_\_ Date \_\_\_\_\_

Name of Adult in Charge: \_\_\_\_\_

Purpose or need for fundraiser: \_\_\_\_\_

Date/s of Fundraiser: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

If ongoing (e.g. box tops, Target program, etc.), please note as such in description.

Description of Fundraiser: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Expected amount of money to be raised: \_\_\_\_\_

Signature of Adult in Charge: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_