

# ACTIVITY REQUEST

Complete all appropriate blanks and submit to the Athletic/Activity Director at least SIX WEEKS prior to date of the activity. Attach alphabetical list of students involved.

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

School Group \_\_\_\_\_

Type of Activity:     Fund Raiser                       Performance                       Assembly

Description of Activity: \_\_\_\_\_

Purpose of Activity: \_\_\_\_\_

Place of Activity: \_\_\_\_\_

Day: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Periods \_\_\_\_\_

Details regarding handling of funds and account funds will go to : \_\_\_\_\_

How will funds be used : \_\_\_\_\_

Other pertinent Data: \_\_\_\_\_

Approved

Denied

\_\_\_\_\_  
Administrative Signature

\_\_\_\_\_  
Date