



H.J. Cambie Secondary Club Fundraiser/Event Approval Form

This form **must be completed at least two weeks prior** to any fundraising or event. Completed form must then be submitted to Mr. Laing.

Staff Sponsor: _____

Club Name: _____

Club President(s): _____

Proposed Date(s)/Time(s) of Fundraiser/Event:

Location of Event: _____

Purpose/Rationale for Fundraiser/Event:

Recipient of Funds:

- Cash Box Required: Yes ____ No ____
- Float Required: Yes ____ (Amount) _____ No ____
- Selling Price: _____
- Permission to use the gym (if necessary) _____

(PE Teacher Signature)

Staff Sponsor Permission (signature): _____

PE Teacher Initials for permission to use the gym (if necessary) _____

Administration Permission (signature): _____

Date: _____