

1. Name of Organization _____
2. Describe the activity: _____

3. Date(s) of activity: Begin _____ End _____
4. Anticipated profits: _____
5. How will revenue (profit) raised by this activity be used? _____

6. Product: _____
7. Company: _____
8. Sales representative: _____
9. Sales method: Door to Door
 At Home to Friends and Neighbors
 At School
 Perform A Service
10. Product cost to Organization: _____
11. Product cost to buyer: _____
Please share any other information that would help the superintendent and principal to
Better understand this activity. _____

No final arrangements and/or commitments shall be made prior to obtaining all signatures signifying approval.

	<u>Signature</u>	<u>Date</u>	<u>Approved</u>	<u>Rejected</u>
* Sponsor	_____	_____	_____	_____
Principal	_____	_____	_____	_____
Superintendent	_____	_____	_____	_____

* If an athletic team, Athletic Director signs approval.

White – Sponsor Yellow – Principal Blue – Superintendent