

DAINGERFIELD-LONE STAR ISD
FUND RAISING APPLICATION

CAMPUS _____

CLUB _____ ACCOUNT # _____

BEGINNING SALE DATE _____ ENDING DATE _____

DESCRIPTION OF PRODUCT(S) _____

WHO WILL DO THE SELLING? _____

WHERE? _____

WILL DOOR-TO-DOOR SOLICITATION BE INVOLVED? _____

VENDOR NAME _____

VENDOR ADDRESS _____

VENDOR PHONE # _____

EXPECTED NET INCOME _____

I AM FAMILIAR WITH THE SCHOOL AND DISTRICT POLICIES
REGARDING THE SALE OF MERCHANDISE AT SCHOOL AND IN
THE COMMUNITY. I ACCEPT RESPONSIBILITY FOR THE SALES
TAX COLLECTION AND CASH COLLECTIONS INVOLVED.

SIGNATURE OF SPONSOR

APPROVAL OF PRINCIPAL