Hood College Student Activities Fundraising Form

Please complete this form and return it to Angie Bauman, Assistant Director of SAO, during your meeting with her to discuss your fundraiser. Meetings can be set up with her either through Bonnie Nipper at the front desk of the SAO or by emailing Angie at bauman@hood.edu.

Fundraisers conducted without prior approval of the SAO will be immediately ended. The SAO reserves the right to deny approval of or terminate any organization fundraiser based on items/services to be sold, dates of fundraiser, or questionable organization investment/activity.

Please print legibly.

Organization Information
Sponsoring Organization ________________________ Today’s Date: ________________
Individual Responsible for Event: ___________________ Phone: _______________ Cell Phone: ___________ E-Mail: __________________________ Organization Account #: ________________________
Organization Advisor: ___________________________ Advisor Signature: __________________________

Fundraising Specifics
Fundraiser Event Title: ____________________________________________________________
Description of Fundraiser: __________________________________________________________
Fundraiser Date(s): __________________ Start Time: ______________ End Time: ______________
Fundraiser Location: ________________________________________________________________
  ____Table(s) needed in Whitaker Atrium
  ____Table(s) needed in Coblentz Dining Hall
  ____Table(s) needed (Location __________________________)
Rain Location (If Applicable): _______________________________________________________
References checked for Vendor: __________________________
Vendor Name and Address: __________________________________________________________
Marketing Method: ________________________________________________________________
Cost to Organization: ______________________________________________________________
Quantity to Sell: _________________________________________________________________
Re-sale Cost: _________________________________________________________________
Profit Goal: _________________________________________________________________
Will food or refreshments need to be ordered through Aramark?  Yes  No

College Use
Other Fundraisers/Whitaker Tables Scheduled for Same Time
________________________________________________________________________________
Fundraiser: ___Approved  ___Denied  Date: _______________
Notes: ________________________________________________________________
________________________________________________________________________________
Table Ordered from Conference Services ____________________________________________

Copy to:  Conference Services  SAO  Student Organization  06.17.09