

AAUW BALLWIN-CHESTERFIELD
APPLICATION FOR FUNDRAISING ACTIVITY

NAME OF COMMITTEE _____ TODAY'S DATE _____

NAME OF FUNDRAISER _____

Please write a brief description of the fundraiser:

Where this fundraiser would be held:

Date or dates requested for the fundraiser: _____

(If there is only one possible date available, please state the reason below:)

Who is the target audience? How much will be participants be charged?

Anticipated profit to be made by fundraiser (please break down expenses vs. profit.)

Submitted by _____

Please remember that all fundraising activities must be approved by the Board.

