

CHINO VALLEY UNIFIED SCHOOL DISTRICT

Associated Student Body

Approval Application for Non-Exempt Fundraising Activity

School: _____

Date: _____

Club/Account: _____ # _____

Advisor: _____

Name of Fundraiser: _____

Date(s) of Fundraiser / / to / / Time of Day: _____ a.m. _____ p.m.

On Campus Sales Off Campus Sales Location

Intended Use for Funds Raised: _____

INCOME POTENTIAL Items to be Sold:

Income Potential: _____ x \$ _____ = \$ _____

Items Ordered Resale Price Income Potential

Estimated New Profit: \$ _____ Less \$ _____ = \$ _____

Income Potential Cost of Goods Sold Net Profit

Please indicate the method(s) to be used for soliciting off campus sales:

<input type="checkbox"/>	Door-to-Door Residential*	<input type="checkbox"/>	Coin Containers	<input type="checkbox"/>	Sale of Merchandise
<input type="checkbox"/>	Door-to-Door Commercial*	<input type="checkbox"/>	Friends and Family	<input type="checkbox"/>	Telephone
<input type="checkbox"/>	Volunteer Solicitors*	<input type="checkbox"/>	Membership	<input type="checkbox"/>	Ticket Sales
<input type="checkbox"/>	Paid Solicitors*	<input type="checkbox"/>	Newspaper Campaign		
<input type="checkbox"/>	Box Office Sales	<input type="checkbox"/>	Radio and/or T.V.		

*City Permit Required: Attach copy of application and permit issued.

EXEMPT ACTIVITIES

Board Approval is not required for the following:

- * ASB cards, yearbooks, Student Store items
- * Concessions at athletic contests
- * Sales of student portraits, class rings, grad gowns
- * Pep sales (spirit ribbons, buttons, etc.)
- * Ticket sales-athletic/other school-sponsored activities
- * Soliciting advertisements for school publications

APPROVALS

Club Officer: _____ Signature: _____ Date: _____

Club Advisor: _____ Signature: _____ Date: _____

HS Activities Director/JH ASB Advisor: _____ Signature: _____ Date: _____

Principal: _____ Signature: _____ Date: _____

Director of Business: _____ Signature: _____ Date: _____

Business Office Use Only