

CYFA Fundraising Request

Team: _____

Contact Name: _____

Phone Number: _____ Email: _____

Fundraiser Description: _____

Dates of Fundraiser: _____

Money raised to be used for: _____

Funds to be verified _____
Parent 1

by the following _____

(3) parents: Parent 2

Parent 3

Final Fundraising Information

(Completed once all money has been collected and allocated)

Total Money Collected: _____

Total Money Spent: _____

If excess, how was it allocated for? _____

Signature of the (3) verified parents:

Parent 1

Date

Parent 2

Date

Parent 3

Date