

**JUPITER TEQUESTA ATHLETIC ASSOCIATION  
FUNDRAISING REQUEST**

Budgeted  
NonBudgeted

Date:

Sport:

Contact Person in Charge \_\_\_\_\_ Phone

Email address:

Description of fundraising event:

Fundraising Goal:

Individuals/Group to be involved:

How will players be supervised:

Date and Time of fundraising event:

Location of fundraising event:

**Attach further documentation if needed.**

**Attach copies of all advertisements, information on item to be sold ( i.e. candy, coupon books etc.)**

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Sports Director Approval: \_\_\_\_\_ Date:

Executive Board Approval: \_\_\_\_\_ Date: