

# ST. PAUL CATHOLIC HIGH SCHOOL

## FUNDRAISING PROPOSAL FORM

**Fundraisers are scheduled and approved on a first come, first served basis. Please return completed form to the *St. Paul Advancement Office* as soon as possible, but at least two (2) weeks prior to event. Questions? Contact Shelley Mendoza at smendoza@spchs.com, or 860-584-0911 ext.21 Fax to: 860-583-4965**

Date of Request: \_\_\_\_\_ Submitted by: \_\_\_\_\_

**Club, Group, Team, Organization, Etc:**

**Proposed Fundraiser:** \_\_\_\_\_

Chair/Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Date(s) of Fundraiser:** \_\_\_\_\_ Alternate Date if 1<sup>st</sup> choice is unavailable: \_\_\_\_\_

Start & End Time of Event: \_\_\_\_\_

Associated Costs to attend, purchase, etc: \_\_\_\_\_

**Detailed Description of Activity or Project:**

(Info will be used for advertising your event for you on our website, St. Paul social media, and newsletters - Be specific.)

**Proposed Location of Fundraiser:** \_\_\_\_\_

Address: (if off campus) \_\_\_\_\_

**Target Groups for Solicitation (i.e. SP parents, area businesses, students, alumni, etc.):**

For Vendor related fundraisers:

Name of Vendor: (ie: Mixed Bag, Yankee Candle, etc.) \_\_\_\_\_

Contact info. for ordering: (ie: website, phone number, email) \_\_\_\_\_

**If building use is required:** (area needed, dates & times, equipment needed, etc.) \_\_\_\_\_