



KAPAUN MT. CARMEL

CATHOLIC HIGH SCHOOL



FUNDRAISING EVENT & ACTIVITY APPLICATION

ORGANIZATION INFORMATION

Name of Organization/Club/Activity: _____

Contact Person: _____ Position: _____

Email Address: _____ Phone #: _____

Address/Zip: _____

EVENT INFORMATION

Name of Event or Activity: _____

Desired Location: _____

Desired Date: _____ Desired Time: _____

Target Audience: _____ Attendance Expected: _____

Description of Event/Purpose: _____

Please describe publicity plan, including dates of promotion: _____

FUNDRAISING INFORMATION

Goal/Budget

Fundraising Goal: _____ Total Budget: _____

Please list* details regarding anticipated income and expenses below.

Income	Amount	Expense	Amount

**If more detail and/or space is needed, a separate budget may be submitted along with application.*



KAPAUN MT. CARMEL

CATHOLIC HIGH SCHOOL



FUNDRAISING EVENT & ACTIVITY APPLICATION, Page 2

Sponsorships/Major Gifts

Will sponsors or major gifts be solicited for this event? YES NO

If YES, all sponsors and/or major gifts need approval by the Director of Development PRIOR to any formal solicitation. Please list* details regarding plans for solicitation of sponsors or major gifts:

Potential Donor	Solicitation	Amount

**If more detail and/or space is needed, a separate solicitation list may be submitted along with application.*

Handling of Funds

Will KMCCHS bookkeeper be responsible for handling of funds? YES NO

Will KMCCHS Development Department be responsible for handling of funds? YES NO

**If no, organization and/or event committee must comply with KMCCHS procedures for handling of funds.*

In-Kind Donations

Will in-kind donations be solicited for this event? YES NO

If YES, please list* details regarding plans for solicitation of in-kind donations:

Potential Donor	Goods/Service Seeking	Value

**If more detail and/or space is needed, a separate solicitation list may be submitted along with application.*



KAPAUN MT. CARMEL

CATHOLIC HIGH SCHOOL



FUNDRAISING EVENT & ACTIVITY APPLICATION, Page 3

Benefactors

Please list* details regarding benefactors.

Benefactor	Proceeds	Intended Restrictions

**If more detail and/or space is needed, a separate solicitation list may be submitted along with application.*

AGREEMENT

I have read the Kapaun Mt. Carmel Catholic High School Fundraising, Event & Activity Guidelines & Procedures, and, I, _____ (name) as a representative of _____ (organization/club/activity), understand and will abide by the Policy.

Signature _____ Date _____

FOR OFFICE USE ONLY

Approved Denied Explanation: _____

Signature _____ Date _____