

Fundraising Request Form

Approval Form for Fundraising (MUST submit via email to PMHA Fundraising Coordinator or Secretary)

Team: ______

Coach: _____
Manager: _____

Activity Requested:

Fundraiser:

Description: _____

Date: _____

Location: _____

Team Representative Signature for Acceptance of Guidelines: ______

Approval

Name: ______ Signature: ______ Position: _______

Date: _______