

# Parsippany Hills High School Fund Raiser Request Form

School Year: \_\_\_\_\_

Booster Club Name: \_\_\_\_\_

Beginning Sale Date: \_\_\_\_\_ Ending Sale Date: \_\_\_\_\_

**NOTE:**  
**DOOR TO DOOR SOLICITATION IS NOT ALLOWED BY PTHSD CLUBS/ORGANIZATIONS.**

For what purpose(s) will the proceeds be used?  
\_\_\_\_\_

Description of Fundraising Project:  
\_\_\_\_\_

Price(s) to be charged per item: \$ \_\_\_\_\_ Cost per item: \$ \_\_\_\_\_

Total amount earned from fundraising during this school year (excluding this fundraiser)  
\$ \_\_\_\_\_

Enter the number of fundraising activities this school year for this organization or club:  
\_\_\_\_\_

**EXPECTED INCOME (Product Sales or Sale of Services)**

Estimated number of items to be sold \_\_\_\_\_(1)

Price to be charged for each item  
\_\_\_\_\_ (2)

Estimated gross receipts (#1 x #2)  
\_\_\_\_\_ (3)

Cost of items to be sold (per item)  
\_\_\_\_\_ (4)

Total cost of items (#1 x #4)  
\_\_\_\_\_ (5)

Other expenses anticipated (advertising, printing, etc.)  
\_\_\_\_\_ (6)

Estimated profit (#3 - #5 - #6 )  
\_\_\_\_\_ (7)

\_\_\_\_\_  
Signature of President      Date

\_\_\_\_\_  
Signature of Treasurer      Date

\_\_\_\_\_  
Approved by Athletic Director Date

\_\_\_\_\_  
Date Application Received