

**Big Sky High School
Fundraising Activity Preapproval Form**

Please complete this form prior to your fundraising activity and submit to AD.

Today's date: _____

Your name: _____

Team: _____

Date(s) of event: _____

Description of event:

Location(s) of event:

Estimated Revenues

Example: Participation fees for golf outing: 25 people x \$200/person = \$5,000

Clinic fees: 20 people x \$300/person = \$6,000

Estimated Expenses

Example: Dinner 25 people x \$30/person = \$750

Shirts: 20 shirts x \$8/shirt = \$160

Total estimated expenses: \$

Total revenue minus total expenses/Estimated profit: \$

Coach signature: _____

AD signature: _____