

Fundraising Proposal Form

Thank you for your interest in submitting a fundraising proposal.

All new ideas will be considered by the Board of Directors.

Thank you in advance for wanting to make St. Charles a better community!

GENERAL INFORMATION

Contact Name: _____

Phone Number: _____ Email: _____

Request date: _____

PROPOSED FUNDRAISER DETAILS

Name of Fundraiser: _____

Brief description of event/how funds will be raised: _____

Target Audience: _____

Number of Volunteers Required: _____ Anticipated Revenue: _____

Please forward this completed form for approval to:

St. Charles Catholic School
Attn: Fundraising Proposal Committee
331 St. Charles St, Winnipeg MB, R3K 1T6

E-mail: boardchair@stccs.ca

OFFICE USE ONLY - EVENT APPROVAL

Name: _____ Date Received: _____

Signature: _____ Date Approved: _____