

WINCHESTER PUBLIC SCHOOLS  
WINSTED, CONNECTICUT

**FUNDRAISING ACTIVITY APPROVAL FORM**

SCHOOL: \_\_\_\_\_ DATE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

SUPERVISOR/CONTACT PERSON: \_\_\_\_\_

DETAILS OF FUNDRAISING ACTIVITY: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER (EXPLAIN): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE(S) OF FUNDRAISING ACTIVITY: \_\_\_\_\_

IF SALE OF GOODS OR SERVICES, INDICATE SALES PRICE OR RANGE OF  
SALE PRICES: \_\_\_\_\_

\_\_\_\_\_

ESTIMATED PROFIT FROM ACTIVITY: \_\_\_\_\_

PRINCIPAL APPROVAL: \_\_\_\_\_

(SIGNATURE OF PRINCIPAL)

DATE: \_\_\_\_\_

☐ **Approved**  
☐ **Denied**

SUPERINTENDENT **APPROVAL:** \_\_\_\_\_

(SIGNATURE OF SUPERINTENDENT)

DATE: \_\_\_\_\_

☐ **Approved**  
☐ **Denied**