4-H Fundraising Application

This form must be submitted for approval before any 4-H fundraising activities can be held

4-H Club / Committee Name: _____________________________________________________________

Person submitting the request: ___________________________________________________________

Email: ____________________________ Phone: ____________________________

What is the proposed fund-raising activity? (What will be done and/or to raise money?)
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Where is the proposed fund-raising activity to be held?
_________________________________________________________________________________
_________________________________________________________________________________

When is the proposed fund-raising activity to take place (dates, times, etc.)? If this is an ongoing fundraiser, please list the beginning and end dates of the activity.
NOTE: At the end of the activity, the 4-H group MUST submit the “Fundraising Report” form.
_________________________________________________________________________________
_________________________________________________________________________________

Why is the proposed fund-raising activity being requested? How does your 4-H Club plan to use the money raised from this fundraiser? Please be specific.
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Please return to Kent County 4-H at least one week before fundraiser:
Mail: Kent County 4-H, 775 Ball NE, Grand Rapids, MI 49503  FAX: 616-632-7899
Email: grabow@anr.msu.edu

For office use only:  Date Received: ___________  Date reviewed: __________________________

Approval signature: ____________________________

Date approval sent: ___________________________ (check) □ mail □ FAX □ e-mail