

**Christ Church Episcopal School
Fundraising Event/Project Request Form**

Please return forms to Connie Lanzl, VP for Advancement, in the CCES Advancement Office.

Handwrite or complete online.

Sponsoring Group: _____ (i.e., Booster Club, Student Council)

Proposed Event/Project: _____

Briefly describe:

Event/Project Chair or Coordinator: _____

Phone: _____ **Email:** _____

Preferred Date(s): _____

2nd Preference for Date(s): _____

Location of Event/Project: _____

Target Fundraising Goal: _____ (or last year's profit if known)

Proposed Use of Funds: (Please be specific as to the proposed use of funds so that we may communicate the need(s) and achieved accomplishments to our constituents.)

(1) _____

(2) _____

(3) _____

Constituents to be Solicited: (check all that apply)

Trustees Faculty/Staff Parents Grandparents Alumni

Parents of Alumni Students Local Businesses/Corporations

Other (explain): _____

Planned Methods of Solicitations and Dates (i.e., direct mail to parents on *date*; email to alumni on *date*, etc.).
Methods to consider using include: direct mail (letter, flyer, postcard), email, website, phone, face-to-face.

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

See next page for required applicable approval signatures>

Applicable Approval Signatures

Faculty/Staff Sponsor _____ Date_____

Division Director _____ Date_____

VP for Finance and Operations _____ Date_____

Headmaster _____ Date_____

To be completed by Advancement Office.

Submitted on (date) _____ to Advancement Office for calendar consideration and approval.

Advancement Office Approval _____ Date_____

or

Reason for not approving:

Master Calendar inclusion

Date Approved Date Not Approved: _____