

St. Paul Lutheran Church and School

Fundraiser Request Form

This form must be completed and returned to the church office at least six weeks prior to the event.

Please print clearly.

Applicants Name: _____

Sponsoring Organizations name: _____

Address: _____

City/State/ZIP: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Fax: _____ E-mail: _____

Alternate Contact: _____

Address: _____

City/State/ZIP: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Fax: _____ E-mail: _____

List of others who will be working on the event: _____ Thrivent Member?

Name: _____ Phone number: _____ Yes / No

Name: _____ Phone number: _____ Yes / No

Name: _____ Phone number: _____ Yes / No

Name: _____ Phone number: _____ Yes / No

Name: _____ Phone number: _____ Yes / No

Name: _____ Phone number: _____ Yes / No

Name of Event: _____

Date(s) requested for the event: _____

Start time: _____ a.m. or p.m. End time: _____ a.m. or p.m.

Will this be an ongoing event? Yes or No

- This form continues on the next page -

- *Continued* -

Describe the event in detail: _____

Anticipated revenue from this event: _____

If monetary proceeds are generated, where will they go? _____

How many events does your group anticipate this year? _____

Are there possible liabilities associated with the event? (If yes, please explain.)

What facilities will be used?

What items, such as the kitchen, A/V, chairs, tables, etc. of St. Paul's will be used for the event?

Two reminders:

The applicant takes full responsibility for cleaning up any items
or facilities used as a result of this event.

Fundraising events cannot take place on St. Paul property without prior
approval and an e-mail confirmation from the Board of Elders chairperson.

Applicant's Signature: _____ Date: _____