



# Mount Carmel School

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## Fundraiser Application

\_\_\_\_\_  
Student Organization

\_\_\_\_\_  
Application Date

\_\_\_\_\_  
Student Organization President (print & sign)

\_\_\_\_\_  
Faculty Advisor (print & sign)

\_\_\_\_\_  
Type of Activity (bake sale, dance, etc.)

\$ \_\_\_\_\_  
Profit Goal

\_\_\_\_\_  
Date of Activity

In the space below, provide a brief detailed description of the proposed fundraising activity:

Approved by:

\_\_\_\_\_  
Director of Institutional Development

\_\_\_\_\_  
Principal

All applications must be completed and submitted to the  
Office of Institutional Development  
one month prior to the requested activity date.  
*Hot lunches, raffles, and solicitation drives are prohibited.*