

Office of Campus Involvement

REQUEST TO HOLD A FUNDRAISER

Contact the Office of Campus Involvement at (580) 559-5207 if you have any questions.

Name _____ of _____ Club _____ or _____ Organization: _____

Requested By: _____ Office/Title: _____

Phone #: _____ Email Address: _____

Type of fundraiser: _____

Location: _____

Purpose _____ /Description _____ of _____ Activity: _____

Start Date: _____ Time: _____ Location: _____

End Date: _____ **Have You Completed a Program Permit Request Form:**

→ **Yes** → **No** → **N/A**

Estimated Profit: \$ _____ Proceeds Will Benefit*:

*If a portion of the proceeds will benefit at charitable cause/organization please specify the percentage: _____

Company or agency you are working with on fundraiser/collection

drive: _____

Club or Organization Representative: _____ Phone: _____

Advisor Signature: _____ Phone: _____

OFFICE USE ONLY

DATE RECEIVED

RECEIVED BY

DATE APPROVED

NOT APPROVED

CAMPUS INVOLVEMENT

Please submit this form to:
The Office of Campus Involvement
ADM 150