



JOHN PAUL COLLEGE FUNDRAISING FORM

(To be completed by all person(s) or groups raising funds for or on behalf of the College)

Name of Person or Group fundraising

Full Name of contact Person

Phone

Mobile Fax

State clearly the purpose of fundraising including benefits to staff and students

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State source of fundraising i.e. Sponsor, Trust or local fundraising. If Sponsor or Trust give the name, address and phone number of Sponsor or Trust

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If you are obtaining funding from a Sponsor or Trust, state the obligations placed on the school e.g. advertising, reporting back etc.

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How much do you expect to raise through the fundraising?

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How will the money be spent?

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When will this fundraising take place?

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Signed

Date

NB: This form must be submitted two weeks prior to fundraising beginning. The Principal, Principal's P.A. and Chair of the P.T.A. must give approval.

Please return form to Liz Lock Principal's P.A.

For Office Use Only

Approved / Declined

Principal

Principal's P.A.

Date