
FUNDRAISING APPLICATION

Organization:

Contact person(s) for fundraiser:

Local address

E-mail address (please use university account)

Daytime phone number

Date(s) of fundraiser

Time(s)

Location(s)

Description of fundraiser:

1. Does the fundraiser event involve the sale of food?

YES

NO

2. Does it involve amplified sound/music?

YES

NO

3. Does it involve an outside vendor?

YES

NO

(If yes, you must have the approval of the Office of Gift Development.)

4. Does it involve the sale of items with the IU, IU East name or logo?

YES

NO

(If yes, you must have the approval of the Director of Marketing. Also, please submit a copy of the design attached to this form.)

Signature of Director of Marketing

Date

5. Does it involve the solicitation of community businesses or individuals?

YES

NO

(If yes, you must have the approval of the Office of Gift Development. Please answer questions 5a, 5b, and 5c below.)

5a. Purpose of solicitation: Describe the benefit(s) this request will have on your organization

5b. Description of item(s) requested

5c. Method of contact – phone, face-to-face, or letter (if letter, please attach a copy)

Anticipated income from fundraiser (\$)

Anticipated expenses (\$)

Anticipated profit (\$)

Expense items (please list)

How will your organization use proceeds from this fundraiser?

(See other side)

The undersigned, in connection with and as part of the above application for a fundraising activity, certifies that the information listed above is correct to the best of his/her knowledge and belief.

Signature of contact person for fundraiser

Date

Signature of faculty advisor

Date

Approved by Office of Gift Development

Date

Please complete and return to Campus Life, Springwood Hall. Depending on the event, additional space for information may be required. In such cases, please attach to application. If you have any questions call (765)973-8331.