

Application for Team Fundraising

Date _____ Age Group _____

Coach's Name _____

Team Name _____

Type of Fundraiser _____

What is the purpose of the fundraising effort?

Do the parents understand that if their child does not participate in the fundraiser, they do not get a share of the proceeds?

Is the team in full agreement on the fundraiser? _____

The Spencer County Sports Association accepts no responsibility for liability for any part of the team fundraising activities. If the fundraiser check is sent to the SCSA, a receipt(s) must be turned in to the SCSA in order for a check to be given to the fundraiser team leader. In lieu of a receipt, the SCSA can pay an invoice for items purchased. A check will not be issued without the proper support documentation. Any excess funds cannot be turned over to a team, nor will it be carried over from season to season. A written report must be given to the SCSA by the team leader detailing how much money was raised, and what it was spent on.

Coach's Name

Signature

Team Leader Name

Signature

President's Name

Date

Approved _____

Denied _____