



St. Mark Catholic Church APPLICATION FOR FUNDRAISER

APPLICATION FOR FUNDRAISER

Please complete Sections 1 – 4 and submit to the Parish Manager at least eight (8) weeks prior to the event. The event will not be included on the Parish Event Schedule unless the Fundraiser is approved in advance of the event. This form may be completed electronically (Microsoft Word [®]) or hand written.

1. SPONSORSHIP

Application Date: Organization/Ministry Sponsor Proposed Date(s) of Activity	<table border="1" style="width: 100%; height: 40px;"> <tr><td style="height: 15px;"></td></tr> <tr><td style="height: 15px;"></td></tr> <tr><td style="height: 15px;"></td></tr> </table>			
LEAD ORGANIZER Name Telephone Number	<table border="1" style="width: 100%; height: 30px;"> <tr><td style="width: 70%;"></td><td style="width: 30%;">E-Mail Address:</td></tr> </table>		E-Mail Address:	
	E-Mail Address:			

2. FUNDRAISER DESCRIPTION

TYPE OF FUNDRAISER	<input type="checkbox"/>	Major Core Fundraiser (example: Golf Tournament)
	<input type="checkbox"/>	"Earmark" Fundraiser (example: garage sale for youth trip or Katrina type event)
	<input type="checkbox"/>	Social Event Fundraiser (example: Valentine's Day Dance)
	<input type="checkbox"/>	Other (please specify): _____
BRIEF DESCRIPTION OF ACTIVITY (ATTACH ADDITIONAL SHEETS IF NECESSARY)		

3. FUNDRAISER DETAILS

Financial Goals of Fundraiser Beneficiary of Funds Number of Volunteers Needed (Estimate) Number of Volunteer/Hours Needed (Estimate) Is There Advance "Seed Funding Required"? If "Yes" Provide A Brief Description of Supplies or Services Needed.	<table border="1" style="width: 100%; height: 100px;"> <tr><td style="height: 15px;">\$ _____</td></tr> <tr><td style="height: 15px;"></td></tr> <tr><td style="height: 15px;"></td></tr> <tr><td style="text-align: center;">Hours</td></tr> <tr><td style="text-align: center;">YES <input type="checkbox"/> NO <input type="checkbox"/></td></tr> <tr><td style="height: 15px;"></td></tr> <tr><td style="height: 15px;"></td></tr> </table>	\$ _____			Hours	YES <input type="checkbox"/> NO <input type="checkbox"/>		
\$ _____								
Hours								
YES <input type="checkbox"/> NO <input type="checkbox"/>								
If "Seed Funding" is needed, who will be supplying the advance funds?								

4. SIGNATURES

APPLICATION SUBMITTED BY:	<table border="1" style="width: 100%; height: 40px;"> <tr> <td style="width: 70%; text-align: center; vertical-align: bottom;">Signature</td> <td style="width: 30%; text-align: center; vertical-align: bottom;">Date</td> </tr> </table>	Signature	Date
Signature	Date		



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5. PARISH REVIEW (THIS SECTION TO BE COMPLETED BY THE DEVELOPMENT COUNCIL AND THE PARISH MANAGER ONLY)

Development Council Review	APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> DATE: _____ COUNCIL MEMBER SIGNATURE _____ COMMENTS: _____
Parish Manager	APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> DATE: _____ PARISH MANAGER SIGNATURE _____ COMMENTS: _____

6. RETURN ON INVESTMENT - "ROI" (TO BE COMPLETED BY THE LEAD ORGANIZER AFTER COMPLETION OF THE FUNDRAISER).

This form, with Section 6 completed, should be resubmitted by the fundraiser Lead Organizer to the Parish Manager with appropriate receipts of expenditures within fourteen (14) days after of completion of activity.

Date Request Returned to Parish Manager Gross Amount of Money Raised. Expenditures Net Amount of Money Raised Net as % of Gross Volunteer Hours Activity Actually Used (Approximate)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="height: 15px;">_____</td></tr> <tr><td style="text-align: right;">\$</td></tr> <tr><td style="height: 15px;">_____</td></tr> <tr><td style="text-align: right;">\$</td></tr> <tr><td style="height: 15px;">_____</td></tr> <tr><td style="text-align: right;">\$</td></tr> <tr><td style="height: 15px;">_____</td></tr> <tr><td style="text-align: right;">\$</td></tr> <tr><td style="height: 15px;">_____</td></tr> <tr><td style="text-align: right;">\$</td></tr> </table>	_____	\$	_____	\$	_____	\$	_____	\$	_____	\$

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ADDITIONAL COMMENTS: _____