Fundraiser Request Form

Name: _____

Email Address: _____

Your Role: ☐Coach ☐Parent ☐Friend/Supporter

Team Requesting Fundraiser: _____

Brief Description of Fundraiser: _____
(Raffle, food sale, donations, etc.)

Start Date: _____ End Date: _____

Goal Amount: _____

How will you use the proceeds? (Be specific and include estimated cost): _____
_____
_____

Target Audience (check all that apply):
☐My team and their families ☐Chatham Charter Families
☐Local Community ☐Larger Community (usually conducted online)

Any additional information to share? _____
_____
_____

Form should be completed and brought to the Boosters Meeting at least one month prior to the start of the requested fundraiser for approval. Boosters Meeting's are on the second Monday of each month at 6:00 pm in the large upstairs classroom above the gym.

Chatham Charter Athletic Boosters
Policy Document
Revised Date: 7/30/2026