

School District

20794 US Hwy 61, Sikeston, MO 63801-7201 Phone: 573-471-2686 | Fax: 573-471-2029

FUNDRAISER FORM

WHO: Who is sponsoring the fundraiser (club/activity ar	nd teacher sponsor?
WHAT: What product (s) will you sell?	
WHEN: When will the fundraiser begin and end?	
WHERE: Where/How will you sell your product(s)?	
WHY: Why are you raising funds (purpose)?	
Please list the company's name and address who will suppl applicable.	y your products, if
Additional Notes:	
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