



NVC STUDENT CLUB FUNDRAISING REQUEST FORM

Student Club Name _____

DAS Account Number _____

Club President _____

Club Treasurer _____

Club Advisor Name _____

Advisor Phone Number/Email _____

Name of Fundraising Activity _____

Date(s) of Fundraising Activity _____

Location of Fundraising Activity _____

Please describe your planned activity/event. Include number of students/employees involved, responsibilities of those involved,

Purpose for funds raised through your activity.

Identify from whom you will be soliciting support. (General description of mailing list or audiences).

Will a business or commercial vendor be participating in your event? Yes No

If yes, please describe their role and provide contact information.

FUNDRAISING APPROVAL: *(obtain in order)*

1. _____ 2. _____ 3. _____
Club Advisor Signature/Date ASNVC Coordinator Signature/date NVC Director of EAS Signature/Date

NOTE: Completed form must be submitted to DAS/Enterprise and Auxiliary Services (EAS) Room 861, 800 Building, at least 14 days prior to event or campaign or the proceeds from the event may not be accepted for deposit. Please call 707-256-7113 for questions or to discuss your project.