## Submit request 2 weeks prior to the event

## **Lyons Activities Accounts**Fundraiser Application

Organization:		Advisor:	
Date:			
Date of fundraiser:	Starting date:		
	Ending date:	(Maximum 2 wee	eks)
Description of fundr	aiser:		
	_		
Revenue anticipated	:	_	
Purpose of fundraise	r:		
☐ Door to Door ☐ Other	r fundraiser (One per org	ganization)	
******		**************************************	******
Administrator:		Date:	
Unloaded on Distric	t website:	Date:	