



4-H FUNDRAISING APPROVAL FORM

Return to the Walton County 4-H Office at least 1 week prior to event.

Date: _____

Name of 4-H Club: _____

Leader's Name: _____ Phone Number: _____

1. For what will the money be used?

2. List and briefly describe planned fundraising activities. Includes dates.

3. Do you plan to solicit donations? YES NO. List businesses, groups, individuals you plan to ask for donations and what you plan to ask for:

Who?

What?

4. Any fundraising event must be properly chaperoned to insure the health and safety of the youth involved. Please list those adults who will be serving as chaperones.

5. Any other information/comments:

Signature of Club Leader

-----For Office Use-----

Changes required/comments:

Approval/Disapproval: _____

Signature of 4-H Agent _____ Date _____