## **FundRaising Charity Activity Approval Blank Form**

We respectfully request permission to hold the following Fundraising activity:

Charitable Purpose	The statement of purpose published on its solicitation material, tickets, programs and documents, including all electronically transmitted material, regarding the use of the proceeds shall read: Proceeds are for the benefit of Shriners Hospitals for Children
Fraternal Purpose	The statement of purpose and disclosure published on its solicitation material, tickets, programs and documents, including all electronically transmitted material, regarding the use of the proceeds shall read: Proceeds are for the benefit of (

activities. Payments are not deductible as charitable contributions.

Temple Name:			
Prepared By:			
Preparer Title:			
Preparer Notes:			
Date of Request:			
Unit/Club Sponsored:			
Activity Type:			
Activity Type Notes:			
Dates of Activity:	Date Start	Date End	
Event Location:			
Event Location: Requested By:			
	Home	Bus	Cell
Requested By:	Home	Bus	Cell
Requested By: Requester Phones:	Home	<b>Bus</b> Potentates Signature	Cell

The completion of the above questions follows the Shrine Fundraising policy and procedures as defined in General Order No. 1 under the Fundraising Activities section. Do not use this form for third party fundraising events benefiting Shriners Hospitals for Children.

## Please have your Potentate sign this form and email a copy of this approval form to kjarvis@shrinenet.org or fax to (813) 281-8460