Attachment A

## Los Angeles Unified School District Booster Club Fundraising Permission Request (RFA-Booster Fundraising)

	School:	
Booster Club IRS FEIN Number:		
Permission is requested to conduct the follow nd/or items to be sold):*	ving activity for the following purpose (include	description of activity
*Booster Club activities at ASB events (such as Athletic of proceeds between ASB and the Booster Club. (please	concession stands) must also be approved by the ASB. ASE refer to page 2 in the Bulletin)	3 must agree to the percentage
Begin Date:End Date:		
On Campus: 📺 Yes 🔛 No		
Specific Location such as quad, auditorium, athleti	ic field, restaurant (provide whether "on campus" of	r "off"):
Time of day:		
If "On-Campus", is any third-party vendor/bu	usiness involved? 🔲 Yes 📄 No	
If yes, please provide name of vendor/busine	ss and description of services provided:	
Booster Club Representative Name	Booster Club Representative Signature	Date
	I I I I I I I I I I I I I I I I I I I	
	Principal (or Designee) Signature	Date
Principal (or Designee) Name		Date
Principal (or Designee) Name		Date
	Date Signature of Financial Manager (Required	
Signature of ASB Treasurer (Required for Secondary)		
Principal (or Designee) Name Signature of ASB Treasurer (Required for Secondary) If Athletic Booster fundraiser, coach and A		
Signature of ASB Treasurer (Required for Secondary)		
Signature of ASB Treasurer (Required for Secondary)	thletic Director must also approve.	for Secondary Date
Signature of ASB Treasurer (Required for Secondary)  If Athletic Booster fundraiser, coach and Att Coach Name	thletic Director must also approve.	for Secondary Date
Signature of ASB Treasurer (Required for Secondary)  If Athletic Booster fundraiser, coach and At Coach Name Campus Athletic Director Name	thletic Director must also approve.	for Secondary Date Date Date Date
Signature of ASB Treasurer (Required for Secondary)  If Athletic Booster fundraiser, coach and At Coach Name Campus Athletic Director Name	thletic Director must also approve. Coach Signature Campus Athletic Director Signature g website (fundraising@lausd.net) three weeks p	for Secondary Date Date Date Date